06/19/2008 15:49

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines American Hospital Association PAC 325 Seventh Street, NW ADDRESS (number and street) Suite 700 Check if different than previously Washington DC 20004 reported. (ACC) FEC IDENTIFICATION NUMBER STATE A ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00106146 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: Termination Report (TER) in the Election on State of 05 0 1 2008 05 3 1 2008 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Ms. Melinda Hatton Type or Print Name of Treasurer Electronically Filed by Ms. Melinda Hatton 06 19 2008 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004)

FE6AN026

Only

FEC Form 3X (Rev. 02/2003)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

Page 2

1203338.69

Write or Type Committee Name American Hospital Association PAC D D " D 0.5 0 1 2008 0.5 3 1 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 2008 1507360.96 January 1 (b) Cash on Hand at 1241633.47 Begining of Reporting Period 141140.46 411821.60 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 1382773.93 1919182.56 6(a) and 6(c) for Column B) 179435.24 715843.87 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period

9. Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D)

(subtract Line 7 from Line 6(d))

0.00

1203338.69

10. Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D)

-	- 0	-	- 0	-	-	-	-	-	
							0.0	0	

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name
American Hospital Association PAC

Report Covering the Period:

м м 0 5

From:

01

2008

To:

м м 0 5 ^D 3 1

2008

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From:		
	(a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	97486.97	173339.00
	(ii) Unitemized	33183.17	66806.81
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	130670.14	240145.81
	.,,,	0.00	0.00
	(b) Political Party Committees		
	(c) Other Political Committees (such as PACs)(d) Total Contributions (add Lines	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	130670.14	240145.81
2.	Transfers From Affiliated/Other Party Committees	10000.00	145260.33
3.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
6	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
Ο.	to Federal candidates and Other Political Committees	0.00	24000.00
7.	Other Federal Receipts (Dividends, Interest, etc.)	470.32	2415.46
8.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account		
	(from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
9.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	141140.46	411821.60
:0.	Total Federal Receipts (subtract Line 18(c) from Line 19)	141140.46	411821.60

DETAILED SUMMARY PAGE

of Disbursements

Page 4

FEC Form 3X (Rev. 02/2003)

	. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	ating Expenditures: ————————————————————————————————————	-	
	Activity (from Schedule H4)	0.00	0.00
(i) Federal Share		
(ii) Non-Federal Share	0.00	0.00
	Other Federal Operating	8359.91	84653.54
	Expenditures Total Operating Expenditures	5555.51	04000.04
(add 21(a)(i), (a)(ii) and (b))	8359.91	84653.54
	fers to Affiliated/Other Party	0.00	0.00
3. Contri	butions to	0.00	0.00
and C	al Candidates/Committeesther Political Committees	125375.00	584000.00
	endent Expenditure Schedule E)	44000.00	44000.00
. Coord	linated Expenditures Made by Party		
(use S	nittees (2 U.S.C. 441a(d)) Schedule F)	0.00	0.00
Loan	Repayments Made	0.00	0.00
	: Madeds of Contributions To:	0.00	0.00
	ndividuals/Persons Other Than Political Committees	140.00	780.00
(b) F	Political Party Committees	0.00	0.00
` '	Political Party Committees Other Political Committees		
,	such as PACs)	1560.33	1560.33
(/	otal Contribution Refunds add Lines 28(a), (b), and (c))	1700.33	2340.33
(add Lines 20(a), (b), and (c))		
Other	Disbursements	0.00	850.00
). Fede	ral Election Activity (2 U.S.C 431(20))		
. ,	shared Federal Election Activity		
,	rom Schedule H6) i) Federal Share	0.00	0.00
		2.22	
	ii) "Levin" Share	0.00	0.00
. ,	ederal Election Activity Paid Entirely Vith Federal Funds	0.00	0.00
	otal Federal Election Activity (add	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Total	Disbursements (add Lines 21(c), 22,		
	4, 25, 26, 27, 28(d), 29 and 30(c))	179435.24	715843.87
	Federal Disbursements		
(SUDT	ract Line 21(a)(ii) and Line 30(a)(ii)		715843.87

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	130670.14	240145.81
34.	Total Contribution Refunds (from Line 28(d))	1700.33	2340.33
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	128969.81	237805.48
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	8359.91	84653.54
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	8359.91	84653.54

FE6AN026

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 129 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any pers e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Lex S. Anderson Mailing Address 1923 South Utica Ave	enue State Zip Code	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Tulsa	OK 74104-6502	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. John Medical Center Receipt For: Primary General Other (specify) ▼	Occupation Chief Financial Officer Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Mr. Charles Anderson Mailing Address 1501 S. Virginia Ave.	.I	Date of Receipt 0 5 0 5 2 0 0 8
City	State Zip Code	Transaction ID: 15432002
<u>Atoka</u>	OK 74525-3298	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer St. John Medical Center	Occupation Hospital Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Richard Boone		Date of Receipt
Mailing Address 1923 South Utica Ave	enue	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15432007
Tulsa	OK 74104-5445	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer St. John Medical Center	Occupation Administrator	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
		1250.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 129 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
American Hospital Association PAC	; 		ı
Full Name (Last, First, Middle Initial) Mr. Dewey Davis			Date of Receipt
Mailing Address 1923 South Utica A	venue		05 / 05 / 2008
City _Tulsa	State OK	Zip Code 74104-6502	Transaction ID: 15432009 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	74104 0002	250.00
Name of Employer St. John Medical Center	Occupatio Vice Pres		
Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Steve Dobbs			Date of Receipt
Mailing Address 1120 South Utica			05 05 YYYY 2008
City	State	Zip Code	Transaction ID: 15432010
Tulsa FEC ID number of contributing federal political committee.	C	74104-4090	Amount of Each Receipt this Period 500.00
Name of Employer Hillcrest Medical Center	Occupatio Chief Exc	n ecutive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00]
Full Name (Last, First, Middle Initial) Sister M. Therese Gottschalk			Date of Receipt
Mailing Address P O Box 4753			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 15432021
Tulsa FEC ID number of contributing federal political committee.	OK C	74159-0753	Amount of Each Receipt this Period 500.00
Name of Employer St. John Medical Center	Occupatio Presiden		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	_	1250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 129 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Jacquelyn Harms, , R.N.		Date of Receipt
Mailing Address 151 Roger Circle	7.01	05 05 2008
City Durant	State Zip Code OK 74702-1207	Transaction ID: 15432022
FEC ID number of contributing federal political committee.	C 74702-1207	Amount of Each Receipt this Period 500.00
Name of Employer Medical Center of Southeastern Oklahom Receipt For: Primary General Other (specify) ▼	Occupation Chief Executive Officer Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Ms. Debbie Howe Mailing Address Post Office Box 489		Date of Receipt
FOST OTHER BOX 409		05 05 2008
City	State Zip Code	Transaction ID: 15432030
Okeene	OK 73763-0489	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Weatherford Regional Hosp- ital	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Robin E Lake		Date of Receipt
Mailing Address P O Box 2339		05 05 YYYYY 05 05 2008
City	State Zip Code	Transaction ID: 15432037
Elk City	OK 73648-2339	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Great Plains Regional Med- ical Center	Occupation Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SURTOTAL of Receipts This Page (optional)		1250.00
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number)	·	1250.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A	r for commercial purposes, other than using th	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Α.	Full Name (Last, First, Middle Initial) Ms. Jane McDowell		Date of Receipt
	Mailing Address P O Box 90		05 05 2008
	City Waurika	State Zip Code OK 73573-0090	Transaction ID: 15432039 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Jefferson County Hospital	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
— В.	Full Name (Last, First, Middle Initial) Mr. Jerry G Moeller Mailing Address 1323 W. Sixth		Date of Receipt
		7: 0.1	05 05 2008
	City Stillwater	State Zip Code OK 74074-4306	Transaction ID: 15432042 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Stillwater Medical Center	Occupation President and Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
 C.	Full Name (Last, First, Middle Initial) Mr. David Pynn		Date of Receipt
	Mailing Address 1923 South Utica Ave	nue	05 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code OK 74104-6520	Transaction ID: 15432046
	Tulsa FEC ID number of contributing federal political committee.	OK 74104-6520	Amount of Each Receipt this Period 500.00
	Name of Employer St. John Medical Center	Occupation President and Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional) .		1500.00
	FOTAL This Period (last page this line numbe	·	

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Dr. Maha Sultan, M.D. Mailing Address 319 East Josephine		Date of Receipt
<u> </u>	71.0	05 05 2008
City Frederick	State Zip Code OK 73542-2220	Transaction ID: 15432054
FEC ID number of contributing federal political committee.	C 73342-2220	Amount of Each Receipt this Period 500.00
Name of Employer Memorial Hospital and Phy- sician Group	Occupation Hospital Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr Rory Ward		Date of Receipt
Mailing Address 430 North Monta Vis	sta	05 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15432059
<u>Ada</u>	OK 74820-4610	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer Valley View Regional Hosp- ital	Occupation Chief Financial Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Jackye Ward	-1	Date of Receipt
Mailing Address 430 North Monte Vis	eta	05 05 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15432060
<u>Ada</u>	OK 74820-4610	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Valley View Regional Hosp- ital	Occupation Chief Nursing Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	1000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	κ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 129 (check only one)
Any information copied from such Reports are or for commercial purposes, other than using	nd Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		areas of any political committee to	y solicit contributions from soon committees.
Full Name (Last, First, Middle Initial) Mr. Ron W. Webb			Date of Receipt
Mailing Address 1624 Wintersmith E	Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Ada	State OK	Zip Code 74820	Transaction ID: 15432061
FEC ID number of contributing federal political committee.	C	74020	Amount of Each Receipt this Period 700.00
Name of Employer Valley View Regional Hosp- ital	Occupation Chief Exe	n ecutive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 700.00	
Full Name (Last, First, Middle Initial) Mr. William A. Bell			Date of Receipt
Mailing Address 944 Gentian Court			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Tallahassee	State FL	Zip Code 32312-1228	Transaction ID: 15436701 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Florida Hospital Associat- ion	Occupation General		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Dana Ferrell			Date of Receipt
Mailing Address 3303 Park Street			05 05 2008
City Jacksonville	State FL	Zip Code	Transaction ID: 15436702
FEC ID number of contributing federal political committee.	C	32205-7830	Amount of Each Receipt this Period 250.00
Name of Employer Nemours Children's Clinic	Occupation Director	n of Government Relations	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional			1450.00

	JLE A (FEC Form 3X) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 129 (check only one) X
or for comme	ercial purposes, other than using the	atements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	F COMMITTEE (In Full) an Hospital Association PAC			
Mr. Micha	e (Last, First, Middle Initial) el Galloway			Date of Receipt
Mailing A	ddress 444 North Capitol Stree Suite 532	et, NW		05 05 2008
City	ata a	State	Zip Code	Transaction ID: 15436703
	gton umber of contributing plitical committee.	C	20001-1512	Amount of Each Receipt this Period 600.00
Name of Florida H	Employer ospital Associat-	Occupation Vice Pres	n sident, Federal Advocacy	
ion Receipt F	For:	-	e Year-to-Date ▼	
	mary General ler (specify) ♥	0 0	600.00	
Full Name	e (Last, First, Middle Initial) Glatfelter			Date of Receipt
Mailing A	ddress 7285 Heartland Circle			05 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: 15436704
<u>Tallahas</u>	ssee	<u>FL</u>	32312-7501	Amount of Each Receipt this Period
	umber of contributing olitical committee.	С		600.00
	Employer ospital Associat-	Occupation Senior V	n ice President	
<u>ion</u> Receipt F	or:	1	e Year-to-Date ▼	
	mary General er (specify) ♥		600.00	
Full Name	e (Last, First, Middle Initial) Holzer			Date of Receipt
Mailing A	ddress 306 East College Aven	ue		05 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: 15436705
<u>Tallaha</u>		FL		Amount of Each Receipt this Period
	umber of contributing olitical committee.	C		250.00
<u>ion</u>	Employer ospital Associat-	•	sident, Health Policy	
	nary General per (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL	of Receipts This Page (optional)			1450.00
	is Period (last page this line number of			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 129 (check only one) X
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Karen Late, MHS		Date of Receipt
Mailing Address 444 North Capitol Stre Suite 532	eet, NW	05 05 2008
City	State Zip Code	Transaction ID: 15436792
Washington	DC 20001-1512	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Florida Hospital Associat-	Occupation Director, Federal Advocacy	1
ion Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Mark O'Bryant Mailing Address 1300 Miccosukee Roa	nd	Date of Receipt
		05 05 2008
City Tallahassee	State Zip Code FL 32308-5054	Transaction ID: 15436795 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Tallahassee Memorial Heal- thCare Receipt For: Primary General Other (specify) ▼	Occupation President and Chief Executive Officer Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Ms. Phillis Oeters		Date of Receipt
Mailing Address 6855 Red Road, Suite	600	M M / D D / Y Y Y Y Y O S O S O S O S
City	State Zip Code	Transaction ID: 15436796
<u>Miami</u>	FL 33143-3632	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Baptist Health South Flor- ida	Occupation Corporate Vice President Governmen	<u>t</u> an
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		1250.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 129 (check only one) X
or f	y information copied from such Reports and St or commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
۱.	Full Name (Last, First, Middle Initial) Mr. Rich Rasmussen Mailing Address 405 El Destinado Drive)		Date of Receipt 0 5 0 5 2 0 0 8
	City	State FL	Zip Code	Transaction ID: 15437695
	Tallahassee FEC ID number of contributing federal political committee.	C	32301-1522	Amount of Each Receipt this Period 500.00
	Name of Employer Florida Hospital Association Receipt For: Primary General Other (specify)		trategic Communications • Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Ms. Kathy A. Reep Mailing Address 19 W. New Hampshire			Date of Receipt 0 5 0 5 2 0 0 8
	City	State	Zip Code	Transaction ID: 15437696
	Orlando FEC ID number of contributing federal political committee.	FL C	32804-5911	Amount of Each Receipt this Period 250.00
	Name of Employer Florida Hospital Associat- ion - Orlando Receipt For: Primary General	-	n sident, Financial Services e Year-to-Date ▼	1
	Other (specify) 🔻	0 0	250.00	
	Full Name (Last, First, Middle Initial) Ms. Kim Streit			Date of Receipt
	Mailing Address 1317 Eastin Avenue			05 05 YYYYY 2008
	City	State	Zip Code	Transaction ID: 15437697
	Orlando FEC ID number of contributing federal political committee.	FL C	32804-6309	Amount of Each Receipt this Period 250.00
	Name of Employer Florida Hospital Associat- ion - Orlando		th Research & Information	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SI	JBTOTAL of Receipts This Page (optional)		\	1000.00

Mailing Address 3036 Giles Place State		SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16 17
American Hospital Association PAC Full Name (Last, First, Middle Initial) Maing Address 3036 Giles Place City State Zip Code FEC ID number of contributing federal political committee. Name of Employer Florida Hospital Association City State Zip Code Phinary General Other (specify) ▼ Ill Name (Last, First, Middle Initial) Mailing Address 750 Fairview Drive City State Zip Code Lancaster OH 43130-3313 FEC ID number of contributing federal political committee. Name of Employer Farriand Medical Center President and Chief Executive Officer Receipt For: Point Name (Last, First, Middle Initial) Mailing Address 750 Fairview Drive City State Zip Code OH 43130-3313 FEC ID number of contributing federal political committee. Name of Employer Farriand Medical Center President and Chief Executive Officer Receipt For: Point Name (Last, First, Middle Initial) M. LaMart Wyse Mailing Address 975 Tiehack Court West City State Zip Code Other (specify) ▼ Date of Receipt Transaction ID: 15443845 Amount of Each Receipt this Period Transaction ID: 15443845 Amount of Each Receipt this Period President and Chief Executive Officer Receipt State S	,	or for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Mailing Address 3036 Giles Place City Tallahassee FL 32309-2114 FEC ID number of contributing federal political committee. City State Zip Code FL 32309-2114 FEC ID number of contributing federal political committee. City State Zip Code Director, Emergency Mgmt. Svcs. Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Mailing Address 750 Fairview Drive City State Zip Code OH 43190-3313 FEC ID number of contributing federal political committee. City State Zip Code OH 43190-3313 FEC ID number of contributing federal political committee. City State Zip Code OH 43190-3313 FEC ID number of contributing federal political committee. City State Zip Code OH 43190-3313 FEC ID number of contributing federal political committee. City State Zip Code OH 43190-3313 FEC ID number of contributing federal political committee. City State Zip Code OH 4339-3313 FEC ID number of contributing federal political committee. City State Zip Code OH 44833-2312 FEC ID number of contributing federal political committee. City State Zip Code OH 44833-2312 FEC ID number of contributing federal political committee. City State Zip Code OH 44833-2312 FEC ID number of contributing federal political committee. City State Zip Code OH 44833-2312 FEC ID number of contributing federal political committee. City State Zip Code OH 44833-2312 FEC ID number of contributing federal political committee. City State Zip Code OH 44833-2312 Fec ID number of contributing federal political committee. City State Zip Code OH 44833-2312 Fer ID number of contributing federal political committee. City State Zip Code OH 44833-2312 Fer ID number of contributing federal political committee. City State Zip Code OH 44833-2312 Fer ID number of contributing federal political committee. City State Zip Code OH 44833-2312 Fer ID number of contributing federal political committee. City State Zip Code OH 44833-2312 Fer ID number of contributing federal political committee. City State Zip Code OH 44833-2312 Fer ID number of co		` '			
City State Zip Code Tallahassee FL 32309-2114 FEC ID number of contributing federal political committee. Name of Employer Fiorical For: Primary General Other (specify) ▼ State Zip Code Director, Emergency Mgmt. Svcs. Aggregate Year-to-Date ▼ Transaction ID: 15437699 Amount of Each Receipt this Period 600.00 Date of Receipt Transaction ID: 15437699 Amount of Each Receipt this Period 600.00 Date of Receipt Transaction ID: 1543845 Amount of Each Receipt this Period 600.00 Date of Receipt Transaction ID: 1543845 Amount of Each Receipt this Period Transaction ID: 1543845 Amount of Each Receipt this Period Date of Receipt Transaction ID: 1543845 Amount of Each Receipt this Period Date of Receipt Transaction ID: 1543845 Amount of Each Receipt this Period Date of Receipt Transaction ID: 1543845 Amount of Each Receipt this Period Date of Receipt Transaction ID: 1543845 Amount of Each Receipt this Period Date of Receipt Transaction ID: 1543845 Amount of Each Receipt this Period Date of Receipt Transaction ID: 15438645 Amount of Each Receipt this Period Date of Receipt Transaction ID: 15445063 Amount of Each Receipt this Period Date of Receipt Transaction ID: 15445063 Amount of Each Receipt this Period Date of Receipt Transaction ID: 15445063 Amount of Each Receipt this Period Date of Receipt Transaction ID: 15445063 Amount of Each Receipt this Period Date of Receipt Transaction ID: 15445063 Amount of Each Receipt this Period Date of Receipt Transaction ID: 15445063 Amount of Each Receipt this Period Date of Receipt Transaction ID: 15445063 Amount of Each Receipt this Period Date of Receipt Transaction ID: 15445063 Amount of Each Receipt this Period Date of Receipt Transaction ID: 15445063 Amount of Each Receipt this Period Date of Receipt Transaction ID: 15445063 Amount of Each Receipt this Period Date of Receipt Transaction ID: 15445063 Amount of Each Receipt this Period Date of Receipt Transaction ID: 15445063 Amount of Each Receipt this Period	۸.	Mr. John Wilgis			-
Tallahassee FL 32309-2114 FEC ID number of contributing federal political committee. Name of Employer Prinda Hospital Associat Director, Emergency Mgmt. Svcs. Name of Employer Primary General Other (specify) ▼ Occupation Director, Emergency Mgmt. Svcs. Aggregate Year-to-Date ▼ Other (specify) ▼ Other (specify) ▼ State Zip Code Other Additional State			State	Zip Code	05 05 2008
FEC ID number of contributing federal political committee. Name of Employer Farried Medical Center Primary General Oncoupation Farried Medical Center Primary General Oncommunity Gene		<u>Tallahassee</u>	FL	32309-2114	
Date of Receipt Date of R			С		
Primary General Other (specify) ▼ 600.00 Full Name (Last, First, Middle Initial) Mis. Mina H Ubbing Mailing Address 750 Fairview Drive City State Zip Code Lancaster OH 43130-3313 FEC ID number of contributing federal political committee. Name of Employer Galion OH 44833-2312 FEC ID number of contributing General Other (Last, First, Middle Initial) Mis. LaMar L Wyse Mailing Address 975 Tiehack Court West City State Zip Code Mis. Amount of Each Receipt this Period Date of Receipt Aggregate Year-to-Date ▼ Date of Receipt Date of Receipt Transaction ID: 15445083 Amount of Each Receipt this Period Date of Receipt Transaction ID: 15445083 Amount of Each Receipt this Period Date of Receipt Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: 15445083 Amount of Each Receipt this Period President and Chief Executive Officer Receipt For: Primary General Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 250.00 Substotial of Receipts This Page (optional)		ion			
Ms. Mina H Ubbing Mailing Address 750 Fairview Drive City State Zip Code OH 43130-3313 FEC ID number of contributing federal political committee. Name of Employer Fairfield Medical Center Primary General OH 44833-2312 City State Zip Code OH 43130-3313 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. City State Zip Code Occupation President and Chief Executive Officer Receipt For: Other (specify) ▼ State Zip Code OH 44833-2312 Date of Receipt Amount of Each Receipt this Period FEC ID number of contributing federal political committee. City State Zip Code OH 44833-2312 Amount of Each Receipt Transaction ID: 15443063 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. City State Zip Code OH 44833-2312 City State Zip Code OH 44833-2312 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. City State Zip Code OH 44833-2312 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. City State Zip Code OH 44833-2312 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. City State Zip Code OH 44833-2312 Amount of Each Receipt This Period FEC ID number of contributing federal political committee. City State Zip Code OH 44833-2312 Amount of Each Receipt This Period FEC ID number of contributing federal political committee. City State Zip Code OH 44833-2312 Amount of Each Receipt This Period		Primary General	Aggregate	1 1 1 1 1 1 1	
City Lancaster OH 43130-3313 FEC ID number of contributing federal political committee. Name of Employer Fairfield Medical Center Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. LaMar L Wyse Mailing Address 975 Tiehack Court West City Gallion FEC ID number of contributing federal political committee. City State Zip Code OH 44833-2312 FEC ID number of contributing federal political committee. City State Zip Code OH 44833-2312 FEC ID number of contributing federal political committee. Name of Employer Galon Community Hospital Receipt For: Primary General Other (specify) ▼ Substotal Annual Chief Executive Officer Aggregate Year-to-Date ▼ Substotal of Receipts This Page (optional) Substotal of Receipts This Page (optional)	- 3.				Date of Receipt
Lancaster OH 43130-3313 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Fairfield Medical Center Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. LaMar L Wyse Mailing Address 975 Tiehack Court West City State Zip Code Galion OH 44833-2312 FEC ID number of contributing federal political committee. Name of Employer Galion Community Hospital Receipt For: Primary General Other (specify) ▼ Substotal Amount of Each Receipt this Period Date of Receipt Transaction ID: 15445063 Amount of Each Receipt this Period Date of Receipt Transaction ID: 15445063 Amount of Each Receipt this Period Date of Receipt Transaction ID: 15445063 Amount of Each Receipt this Period Date of Receipt Transaction ID: 15445063 Amount of Each Receipt this Period Date of Receipt Transaction ID: 15445063 Amount of Each Receipt this Period Date of Receipt Transaction ID: 15445063 Amount of Each Receipt this Period Date of Receipt Transaction ID: 15445063 Amount of Each Receipt this Period Each Receipt For: Date of Receipt Transaction ID: 15445063 Amount of Each Receipt this Period Date of Receipt Transaction ID: 15445063 Amount of Each Receipt this Period Date of Receipt Transaction ID: 15445063 Amount of Each Receipt this Period					05 05 2008
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Name of Employer Fairfield Medical Center Receipt For: Primary Other (specify) ▼ Name of Employer Gallon Other (specify) ▼ Name of Employer Gallon Other (specify) ▼ Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ Date of Receipt Mailing Address 975 Tiehack Court West City State Zip Code OH 44833-2312 FEC ID number of contributing federal political committee. Name of Employer Gallon Community Hospital Receipt For: Primary General Other (specify) ▼ Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ Substotal of Receipts This Page (optional) 1100.00		Lancaster	<u>OH</u>	43130-3313	Amount of Each Receipt this Period
President and Chief Executive Officer Receipt For:			C		250.00
Primary General Other (specify) ▼		Name of Employer Fairfield Medical Center			
Mr. LaMar L Wyse Mailing Address 975 Tiehack Court West City State Zip Code Galion OH 44833-2312 FEC ID number of contributing federal political committee. Name of Employer Galion Community Hospital President and Chief Executive Officer Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) Date of Receipt Transaction ID: 15445063 Amount of Each Receipt this Period 250.00 1100.00		Primary General	Aggregate		
City State Zip Code OH 44833-2312 FEC ID number of contributing federal political committee. Name of Employer Galion Community Hospital Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) State Zip Code Transaction ID: 15445063 Amount of Each Receipt this Period 250.00 C 250.00	- :.				Date of Receipt
Galion OH 44833-2312 FEC ID number of contributing federal political committee. Name of Employer Galion Community Hospital President and Chief Executive Officer Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) Amount of Each Receipt this Period 250.00 Aggregate Year-to-Date ▼ 1100.00					05 05 2008
FEC ID number of contributing federal political committee. Name of Employer Galion Community Hospital Receipt For: Primary General Other (specify) SUBTOTAL of Receipts This Page (optional) Page 250.00 250.00 250.00		-		•	
Receipt For: Primary Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) Aggregate Year-to-Date Aggregate Year-to-Date 250.00 Cocupation President and Chief Executive Officer Aggregate Year-to-Date 250.00			UH	44833-2312	Amount of Each Receipt this Period
Receipt For: Primary General Other (specify) SUBTOTAL of Receipts This Page (optional) Aggregate Year-to-Date 250.00		federal political committee.	C		250.00
Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)			President	t and Chief Executive Officer	,
SUBTOTAL of Receipts This Page (optional)			Aggregate		1
SUBTOTAL OF Necepts 11ths Page (optional)		Other (specify) ▼		250.00	
		SUBTOTAL of Receipts This Page (optional)	1		1100.00
TOTAL This Period (last page this line number only)	F			<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any personame and address of any political committee to	
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Dr. John D. Clough, MD		Date of Receipt
Mailing Address 1760 Carriage Place		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15445069
Gates Mills	OH 44040-9755	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Cleveland Clinic Health	Occupation Director of Llegith Affairs	
System Receipt For:	Director of Health Affairs	\dashv
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. R. Reed Fraley		Date of Receipt
Mailing Address 257 Clouse Lane		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15445070
Granville	OH 43023-1428	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Ohio Hospital Association	Occupation Senior Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. John Nash		Date of Receipt
Mailing Address 817 Sun Ridge Lane		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15445073
Chagrin Falls	OH 44022-4257	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer University Hospitals	Occupation Senior Vice President & General Mana	age
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	>	1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person ne name and address of any political committee to s	for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Ms. Lynn D'Esmond, RN MSHA		Date of Receipt
Mailing Address 738 Cambridge Stree		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Boston	State Zip Code MA 02135-2907	Transaction ID: 15486993
FEC ID number of contributing federal political committee.	C 02133-2907	Amount of Each Receipt this Period 350.00
Name of Employer Caritas Christi Health Ca- re	Occupation Assistant Vice President - Patient Car	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Patricia Taylor Campbell, RN, MSN Mailing Address 172 Morgan Bluff Rd		Date of Receipt
Post Office Box 3354	19	05 05 2008
City Mooresville	State Zip Code NC 28117-8478	Transaction ID: 15486994
FEC ID number of contributing federal political committee.	NC 28117-8478	Amount of Each Receipt this Period 350.00
Name of Employer Presbyterian Hospital	Occupation Director, Women and Children's Service	- Ce
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Dr. Susan L. Bowar-Ferres, PhD, RN		Date of Receipt
Mailing Address P.O. Box 137		05 05 2008
City	State Zip Code	Transaction ID: 15486997
New Rochelle	NY 10802-0137	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer New York University Medic- al Center	Occupation Senior Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	1050.00
TOTAL This Period (last page this line number	er only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and St or for commercial purposes, other than using the	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Jeanne Bauer, RN, MSN		Date of Receipt
Mailing Address 1921 Lauderdale Stree		05 / 05 / 2008
City	State Zip Code	Transaction ID: 15487002
Houston	TX 77030-4105	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Methodist Hospital, The	Occupation Nursing Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Rosemary Ann Roth, RN, MSN Mailing Address 237 Forgham Road		Date of Receipt
		05 05 2008
City	State Zip Code	Transaction ID: 15487004
Rochester	NY 14616-3334	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Rochester General Hospital	Occupation Surgical Services Nursing Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Dianne J. Anderson, MS, RN		Date of Receipt
Mailing Address 330 Brookline Avenue Mail Stop ST221		05 05 7 2008
City	State Zip Code	Transaction ID: 15487025
Boston FEC ID number of contributing federal political committee.	MA 02215-5400	Amount of Each Receipt this Period 350.00
Name of Employer Beth Israel Deaconess Med- ical Center	Occupation Sr. Vice President, Patient Services	-
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General Other (specify) ▼	350.00	
CUPTOTAL of Possints This Page (antique)		800.00
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number of	· ·	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any per e name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Eileen Good, RN, MSN, M Mailing Address 2600 Sixth Street Sou	thwest	Date of Receipt
City	State Zip Code	0 5 0 6 2 0 0 8 Transaction ID: 15488410
Canton	OH 44710-1702	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Aultman Hospital	Occupation Senior Vice President/CNO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Jeff M. Dye		Date of Receipt
Mailing Address 2121 Osuna Rd NE		05 15 2008
City	State Zip Code	Transaction ID: 15488551
Albuquerque FEC ID number of contributing federal political committee.	NM 87113-1001	Amount of Each Receipt this Period 500.00
Name of Employer New Mexico Hospital Association	Occupation President and Chief Executive Offic	er
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Robert A Garcia		Date of Receipt
Mailing Address P O Box 26666		05 15 2008
City	State Zip Code	Transaction ID: 15488554
Albuquerque	NM 87125-6666	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Presbyterian Healthcare Services	Occupation Vice President	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		1100.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 129 (check only one) X 11a
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any person g the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Beth Ann Taylor Mailing Address 16 Dodge Place City Grosse Pointe FEC ID number of contributing federal political committee. Name of Employer John D. Dingell Veterans Affairs Medic Receipt For: Primary General Other (specify)	State Zip Code MI 48230-1939 C Occupation Associate Director, Patient Care Servi Aggregate Year-to-Date 210.00	Date of Receipt M M M / D D / Y Y Y Y Y 0 5 0 6 2 0 0 8 Transaction ID: 15488611 Amount of Each Receipt this Period 210.00
Full Name (Last, First, Middle Initial) Ms. Helene M. Burns, MSN, RN Mailing Address 69 Woodstream D City Drexel Hill FEC ID number of contributing	State Zip Code PA 19026-1187	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Delaware County Memorial Hospital Receipt For: Primary Other (specify)	Occupation Director of Nursing Aggregate Year-to-Date 350.00	350.00
Full Name (Last, First, Middle Initial) Mr Jeffery L. Hudson Mailing Address City Lake City FEC ID number of contributing federal political committee.	State Zip Code FL 60640-3966	Date of Receipt M M / D D D / Y Y Y Y Y 0 5 0 6 2 0 0 8 Transaction ID: 15488619 Amount of Each Receipt this Period 500.00
Name of Employer Shands Lake Shore Receipt For: Primary General Other (specify) ▼	Occupation Chief Nursing Officer Aggregate Year-to-Date 500.00	
SUBTOTAL of Receipts This Page (option	al)	1060.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 129 (check only one) X
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may name and add	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions
American Hospital Association PAC Full Name (Last, First, Middle Initial)			
Dr. Kathryn Sapnas, PhD, RN			Date of Receipt
Mailing Address 1201 NW 16 Street	State	Zip Code	05 06 2008
City <u>Miami</u>	FL	Zip Gode	Transaction ID: 15489168 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		350.00
Name of Employer Miami VA Healthcare System	Occupation Chief Nurs	se Informatics & Research	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Patricia Yoder-Wise			Date of Receipt
Mailing Address 7309 93rd Street			05 06 7 2008
City Lubbock	State TX	Zip Code 79424-4939	Transaction ID: 15489173 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	7.572-7.7000	250.00
Name of Employer Texas Tech University Hea- Ith	Occupation Professor		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Mary K. Krugman			Date of Receipt
Mailing Address 237 Lead King Drive			05 06 YYYY 05 06 2008
City	State	Zip Code	Transaction ID: 15489174
Castle Rock FEC ID number of contributing federal political committee.	CO	80108-8306	Amount of Each Receipt this Period 275.00
Name of Employer University of Colorado Ho- spital		Professional Resources	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)			875.00
TOTAL This Period (last page this line number of	only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAG	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Arthur A Ushijima Mailing Address 1301 Punchbowl St	State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
Honolulu FEC ID number of contributing federal political committee.	HI 96813-2402	Amount of Each Receipt this Period 875.00
Name of Employer Queen's Medical Center Receipt For: Primary General Other (specify) ▼	Occupation President Aggregate Year-to-Date 875.00	
Full Name (Last, First, Middle Initial) Ms. Susan R Murray Mailing Address 3288 Moanalua Ro	ad	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Honolulu FEC ID number of contributing federal political committee.	State Zip Code HI 96819-1495 C	Transaction ID: 15490775 Amount of Each Receipt this Period 500.00
Name of Employer Kaiser Permanente Medical Center Receipt For: Primary General Other (specify)	Occupation Regional Administrator Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Mr. Craig J Broman Mailing Address 1406 Sixth Avenue	North	Date of Receipt
City Saint Cloud	State Zip Code MN 56303-1901	0 5
FEC ID number of contributing federal political committee. Name of Employer	Occupation	250.00
Name of Employer St. Cloud Hospital Receipt For: Primary General Other (specify) ▼	President Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	I) >	1625.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16 17
4	Any information copied from such Reports and S or for commercial purposes, other than using the	statements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Α.	Full Name (Last, First, Middle Initial) Mr. Keith Okeson		Date of Receipt
	Mailing Address 715 Delmore Avenue		05 12 2008
	City Roseau	State Zip Code MN 56751-1534	Transaction ID: 15490791 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer LifeCare Medical Center	Occupation President and CEO	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
— В.	Full Name (Last, First, Middle Initial) Mr David Archer	I	Date of Receipt
	Mailing Address 313 North Main Street		05 19 2008
	City Applicant City	State Zip Code	Transaction ID: 15490889
	Ashland City FEC ID number of contributing federal political committee.	TN 37015-1358	Amount of Each Receipt this Period
	Name of Employer Saint Francis Hospital	Occupation President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	
_ C.	Full Name (Last, First, Middle Initial) Mr. Scott Bowman		Date of Receipt
	Mailing Address 304 Wright Street		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 15490890
	Sweetwater FEC ID number of contributing federal political committee.	TN 37874-2897	Amount of Each Receipt this Period 500.00
	Name of Employer Sweetwater Hospital	Occupation Administrator	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)		1750.00
	TOTAL This Period (last page this line number		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS Any information copied from such Benotics at	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	FOR LINE NUMBER: PAGE 24 / 129 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	the name and address of any political committee to so	licit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Charlotte Burns		Date of Receipt
Mailing Address 935 Wayne Road		05 19 2008
City	State Zip Code	Transaction ID: 15490891
Savannah	TN 38372-1937	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Hardin Medical Center	Occupation Administrator and Chief Executive Offi	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Larry Goldberg		Date of Receipt
Mailing Address 1211 22nd Avenue	South	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15490892
<u>Nashville</u>	TN 37232-0004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Vanderbilt University Med- ical Center	Occupation Executive Director and Chief Executive	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. R. Cy Huffman		Date of Receipt
Mailing Address 975 East Third Stre	eet	M M / D D / Y Y Y Y Y O S O S O S O S O S O S O S O
City	State Zip Code	Transaction ID: 15490893
Chattanooga	TN 37403-2103	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Erlanger Health System	Occupation Senior Vice President/Chief Medical Of	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
CURTOTAL of Passints This Pass (anti-		1050.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 129 (check only one) X 11a 11b 11c 12 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Harry Jacobson Mailing Address D3300 Medical Cente	er North	Date of Receipt
City	State Zip Code	0 5 1 9 2 0 0 8 Transaction ID: 15490895
<u>Nashville</u>	TN 37232-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Vanderbilt University Med- ical Center	Occupation Vice Chancellor for Health Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Robert P Main		Date of Receipt
Mailing Address One Siskin Plaza		05 19 2008
City	State Zip Code	Transaction ID: 15490896
Chattanooga FEC ID number of contributing federal political committee.	TN 37403-1306	Amount of Each Receipt this Period 1000.00
Name of Employer Siskin Hospital for Physi- cal Rehabilit	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Ms Britt Tabor		Date of Receipt
Mailing Address 975 East Third Street		05 19 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Chattanooga	State Zip Code TN 37403-2163	Transaction ID: 15490897 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Erlanger Medical Center	Occupation Senior Vice President and Chief Finan	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	·····	2000.00
TOTAL This Period (last page this line numbe	er only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 129 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any person name and address of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Mary Layne Van Cleave		Date of Receipt
Mailing Address 1208 Brookview Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15490898
Brentwood	TN 37027-8424	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Tennessee Hospital Associ- ation	Occupation Executive VP & COO	
Receipt For: ☐ Primary ☐ General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Ms. Nancy P White		Date of Receipt
Mailing Address 975 East Third Street		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15490899
Chattanooga	TN 37403-2103	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Erlanger Health System	Occupation Sr. Vice President, Government Relation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms Charlesetta Woodard-Thompson		Date of Receipt
Mailing Address 975 East Third Street		05 19 2008
City	State Zip Code	Transaction ID: 15490901
Chattanooga	TN 37403-2163	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer Erlanger Health System	Occupation Executive Vice President and COO]
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	.	2000.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any person the name and address of any political committee to s	tor the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. John T Gribbin		Date of Receipt
Mailing Address 901 West Main Stre	et	05 09 2008
City	State Zip Code	Transaction ID: 15494843
Freehold	NJ 07728-2537	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer CentraState Healthcare Sy- stem	Occupation President and Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr. Michael Maron		Date of Receipt
Mailing Address 34 Grove Street		M M / D D / Y Y Y Y Y Y O 5 0 9 2 0 0 8
City	State Zip Code	Transaction ID: 15494851
Oradell	NJ 07649	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Holy Name Hospital	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. John P McGee		Date of Receipt
Mailing Address 80 James Street, 2r	nd Floor	05 09 2008
City	State Zip Code	Transaction ID: 15494852
Edison	NJ 08820-3938	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Solaris Health System	Occupation President and Chief Executive Officer]
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
) >	1500.00

SCHEDULE A (FEC Form 3X)	OSC SCPARAC SCRICAGIC(S)	FOR LINE NUMBER: PAGE 28 / 129 (check only one)
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any personne name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Richard P Miller		Date of Receipt
Mailing Address 37 Milford Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15494854
<u>Marlton</u>	NJ 08053-5408	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Virtua Health	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. James I Miller		Date of Receipt
Mailing Address 77 Pringle Way		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15494881
Reno	NV 89502-1474	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Renown Health	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Michael E Henze		Date of Receipt
Mailing Address 54 Hospital Drive		05 19 2008
City	State Zip Code	Transaction ID: 15494889
Osage Beach	MO 65065-3050	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	600.00
Name of Employer Lake Regional Health Syst- em	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	1600.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to so	for the purpose of soliciting contributions olicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Theresa J. Rogers Mailing Address 2644 Jennifer Drive		Date of Receipt
City	State Zip Code	0 5 1 9 2 0 0 8 Transaction ID: 15495019
Jefferson City	MO 65101-3997	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Missouri Hospital Associa- tion	Occupation Sr. V.P. of Data & Information Service	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr Edward Bruff		Date of Receipt
Mailing Address 1447 North Harrison S		05 19 2008
City	State Zip Code	Transaction ID: 15496451
Saginaw	MI 48602-4727	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	450.00
Name of Employer Covenant Medical Center	Occupation Executive Vice President and Chief Op	e
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial) Mr. Kevin Cawley		Date of Receipt
Mailing Address 11803 Silverspring Dr		05 19 2008
City	State Zip Code	Transaction ID: 15496453
Dewitt	MI 48820-7731	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	340.00
Name of Employer Sheridan Community Hospit- al	Occupation Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	340.00	
SUBTOTAL of Receipts This Page (optional)		1140.00
TOTAL This Period (last page this line number	<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 129 (check only one) X
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions
American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. J. Patrick Dyson Mailing Address P.O. Box 51167 City Kalamazoo FEC ID number of contributing federal political committee. Name of Employer Borgess Health Alliance Receipt For: Primary General Other (specify)	State Zip Code MI 49005-1167 C Occupation Executive Vice President Aggregate Year-to-Date 375.00	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Garry C Faja Mailing Address 920 Aberdeen City Ann Arbor FEC ID number of contributing federal political committee. Name of Employer Saint Joseph Mercy Health System Receipt For: Primary General Other (specify)	State Zip Code MI 48104-2808 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 500.00	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. David S. Finkbeiner Mailing Address 85 Damon Road City Haslett FEC ID number of contributing federal political committee. Name of Employer Michigan Health & Hospital Association Receipt For: Primary General Other (specify)	State Zip Code MI 48840-9747 C Occupation Senior Vice President, Advocacy Aggregate Year-to-Date 83.33	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		958.33

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Χ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 129 (check only one)		
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) American Hospital Association PAG	<u> </u>	· · · · · · · · · · · · · · · · · · ·			
Full Name (Last, First, Middle Initial) Ms. Georgia R Fojtasek			Date of Receipt		
	Mailing Address 5325 Browns Lake Road				
City Jackson	State MI	Zip Code 49203-5602	Transaction ID: 15496458 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		500.00		
Name of Employer Foote Health System	Occupation President	n t and Chief Executive Office	-		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00			
Full Name (Last, First, Middle Initial) Mr Mark E Gronda	I		Date of Receipt		
Mailing Address 2109 Durham			05 19 Y Y Y Y Y Y		
City <u>Sag</u> inaw	State MI	Zip Code 48609-9236	Transaction ID: 15496459 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	10000 0200	450.00		
Name of Employer Covenant Medical Center	Occupation Vice Pres	n sident and Chief Financial O	 ff		
Receipt For: Primary General Other (specify)	- ' '	e Year-to-Date ▼ 450.00			
Full Name (Last, First, Middle Initial) Mr Dennis R Herrick			Date of Receipt		
Mailing Address 1450 Redding			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State	Zip Code	Transaction ID: 15496461		
Birmingham FEC ID number of contributing federal political committee.	C	48009-1027	Amount of Each Receipt this Period 250.00		
Name of Employer Beaumont Hospital - Royal Oak		sident and Chief Financial O	ff		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00			
SUBTOTAL of Receipts This Page (optional	-10		1200.00		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 129 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. John M. Kosanovich, M.D. Mailing Address 25 E. Hannum Blvd			Date of Receipt
City Saginaw	State MI	Zip Code 48602-1937	Transaction ID: 15496464 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Covenant Medical Center	Occupation	n	400.00
Receipt For: Primary General Other (specify)	Vice Pres Aggregate	sident • Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Mr. Spencer Maidlow Mailing Address 1447 North Harrison	n Street		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 15496467
Saginaw	MI	48602-4727	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Covenant Medical Center Receipt For:		t and Chief Executive Office	r
Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Randall D Oostra, , FACHE			Date of Receipt
Mailing Address 21 Tremore Way			05 19 2008
City Holland	State OH	Zip Code 44870-6081	Transaction ID: 15496468
FEC ID number of contributing federal political committee.	C	44670-0061	Amount of Each Receipt this Period 250.00
Name of Employer ProMedica Health System	Occupation Presiden		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	l)		1150.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 129 (check only one) X
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by any pename and address of any political committee	
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Barbara Rossmann		Date of Receipt
Mailing Address 15855 19 Mile Road		05 19 2008
City	State Zip Code	Transaction ID: 15496470
Clinton Township	MI 48038-3504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Henry Ford Macomb Hospital	Occupation President and Chief Executive Offi	icer
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mrs. Elizabeth S. Schnettler		Date of Receipt
Mailing Address 9120 Port Austin Road		05 19 2008
City	State Zip Code	Transaction ID: 15496472
Bay Port	MI 48720-9770	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Hospital Council of East Central Michi	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Peter J. Schonfeld		Date of Receipt
Mailing Address 7105 Cutler Road		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15496473
<u>Bath</u>	MI 48808-9439	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.33
Name of Employer Michigan Health & Hospital Association	Occupation Sr. Vice President, Policy & Data 9	Svcs
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	83.33	
SUBTOTAL of Receipts This Page (optional)		833.33

ļ	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 34 / 129 (check only one)
	ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a
	Any information copied from such Reports and Si or for commercial purposes, other than using the	tatements may name and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
یا A .	/ Full Name (Last, First, Middle Initial) Ms. Carol Stoll			Date of Receipt
~.	Mailing Address 7630 Laurie Lane N.			05 19 2008
	City	State	Zip Code	Transaction ID: 15496474
	Saginaw	MI	48609-4909	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		350.00
	Name of Employer Covenant Medical Center	Occupation Vice Pres	n sident, Chief Nursing Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
- В.	Full Name (Last, First, Middle Initial) Mr. Tim Wenzel			Date of Receipt
	Mailing Address 555 Northview Drive			05 19 2008
	City	State	Zip Code	Transaction ID: 15496476
	Frankenmuth	MI	48734-9304	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		350.00
	Name of Employer Covenant Medical Center	Occupation Director of	n of Human Resources	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		350.00	
С. С.	Full Name (Last, First, Middle Initial) Mr. Jack L Denton			Date of Receipt
	Mailing Address P O Box 130			05 19 2008
	City	State	Zip Code	Transaction ID: 15496478
	Eaton Rapids	MI	48827-0130	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		375.00
	Name of Employer Eaton Rapids Medical Cent- er	Occupation President	n t and Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
	SUBTOTAL of Receipts This Page (optional)		·····	1075.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 129 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	statements may not be sold or used by any pers r name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. J. Joseph Diederich Mailing Address 10919 Beranek Drive City	State Zip Code	Date of Receipt M
Pinckney FEC ID number of contributing federal political committee.	MI 48169-9736	Amount of Each Receipt this Period 250.00
Name of Employer Oakwood Healthcare, Inc. Receipt For: Primary General Other (specify) ▼	Occupation Chief Operating Officer Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Mr. Michael Duggan Mailing Address 3990 John R Street		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15496481
Detroit FEC ID number of contributing	MI 48201-2018	Amount of Each Receipt this Period 500.00
Name of Employer Detroit Medical Center Receipt For:	Occupation President and Chief Executive Office	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Michael J Falatko		Date of Receipt
Mailing Address 6117 Sunset Ridge Dri		05 / 19 / 2008
City Cass City	State Zip Code MI 48726-1008	Transaction ID: 15496483 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Hills and Dales General Hospital Receipt For:	Occupation Chief Executive Officer Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
		1000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any perso the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. David S. Finkbeiner Mailing Address 85 Damon Road City	State Zip Code	Date of Receipt 0 5 1 9 2 0 0 8 Transaction ID: 15496485
Haslett FEC ID number of contributing federal political committee.	MI 48840-9747	Amount of Each Receipt this Period 416.70
Name of Employer Michigan Health & Hospital Association Receipt For: Primary General Other (specify) ▼	Occupation Senior Vice President, Advocacy Aggregate Year-to-Date ▼ 500.03	
Full Name (Last, First, Middle Initial) Mr. Gerald D Fitzgerald Mailing Address 18 Millrace Ct.		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15496490
<u>Dearborn</u> FEC ID number of contributing federal political committee.	MI 48126-4241	Amount of Each Receipt this Period 500.00
Name of Employer Oakwood Healthcare, Inc.	Occupation Vice Chairman	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Christina Freese-Decker		Date of Receipt
Mailing Address 5562 Highbury Driv	e SE	05 19 2008
City Ada	State Zip Code MI 49301-7738	Transaction ID: 15496491 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Spectrum Health	Occupation Director, Planning & Strategic Dvpmt.	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
		1166.70

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16 17
4	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements may not be sold or used by any pere e name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Α.	Full Name (Last, First, Middle Initial) Mr. Dwight Gascho		Date of Receipt
	Mailing Address 9325 Pt Charity	01-1- 7'- 0-1-	05 19 2008
	City <u>Pigeon</u>	State Zip Code MI 48755-9767	Transaction ID: 15496492 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Scheurer Hospital	Occupation President and Chief Executive Offic	er
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
— В.	Full Name (Last, First, Middle Initial) Mr. Sean Gehle		Date of Receipt
	Mailing Address 1828 Boston Blvd		05 19 2008
	City	State Zip Code	Transaction ID: 15496493
	Lansing	MI 48910-1173	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer St. John Health	Occupation Vice President, Advocacy	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00	
с. С.	Full Name (Last, First, Middle Initial) Ms. Alice Gerard		Date of Receipt
	Mailing Address 3231 Bangor Rd.		05 19 2008
	City	State Zip Code	Transaction ID: 15496500
	Bay City	MI 48706-1852	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Bay Regional Medical Cent- er	Occupation President & CEO	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	_
	Other (specify)	500.00	
	SUBTOTAL of Receipts This Page (optional) .		1000.00
上	TOTAL This Period (last page this line number		•

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16 16		
or for commercial purposes, other than using t	d Statements may not be sold or used by any pers the name and address of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) American Hospital Association PAC				
Full Name (Last, First, Middle Initial) Ms. Elizabeth Gertz		Date of Receipt		
Mailing Address 1047 Curtis Avenue City	State Zip Code	0 5 1 9 2 0 0 8 Transaction ID: 15496506		
Petoskey	MI 49770-2811	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	250.00		
Name of Employer North Central Council of the MHA	Occupation Executive Director			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00			
Full Name (Last, First, Middle Initial) Mr. Wayne P Hellerstedt	Date of Receipt			
Mailing Address 17661 W. Sprang Pt	05 19 2008			
City	State Zip Code	Transaction ID: 15496508		
Curtis	MI 49820	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С	250.00		
Name of Employer Helen Newberry Joy Hospit- al	Occupation Chief Executive Officer			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00			
Full Name (Last, First, Middle Initial) Mr. Gary Henriksen		Date of Receipt		
	·			
City <u>Dimondale</u>	State Zip Code MI 48821-9795	Transaction ID: 15496509		
FEC ID number of contributing federal political committee.	C 40821-9795	Amount of Each Receipt this Period 750.00		
Name of Employer Michigan Health & Hospital Association	Occupation Chief Finance Officer			
Receipt For:	Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	750.00			
		1250.00		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 129 (check only one) X
A	ny information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may r name and addre	not be sold or used by any perso ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ .	Full Name (Last, First, Middle Initial) Mr. Lester Heyboer, , Jr. Mailing Address 14 Pondview Drive City Saginaw	State MI	Zip Code 48609-5141	Date of Receipt 0 5 1 9 2 0 0 8 Transaction ID: 15496511 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40009-3141	250.00
	Name of Employer HealthSource Saginaw Receipt For: Primary General Other (specify) ▼		and Chief Executive Office Year-to-Date ▼ 250.00	r]
3.	Full Name (Last, First, Middle Initial) Mr. Ned B Hughes, , Jr. Mailing Address 6233 W. Pat Street			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 15496512
	FEC ID number of contributing federal political committee.	C	49412-7786	Amount of Each Receipt this Period 250.00
	Name of Employer Gerber Memorial Health Se- rvices Receipt For: Primary General Other (specify)	Occupation President Aggregate Y	/ear-to-Date ▼ 250.00]
 :.	Full Name (Last, First, Middle Initial) Mr. William Jackson Mailing Address 270 Turkey Run			Date of Receipt
				05 19 2008
	City Charlevoix	State MI	Zip Code 49720-9766	Transaction ID: 15496516 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer Charlevoix Area Hospital	Occupation President		
	Receipt For: Primary General Other (specify) ▼		/ear-to-Date ▼ 500.00	
S	SUBTOTAL of Receipts This Page (optional)	I)	1000.00

	IEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for	commercial purposes, other than using the	tatements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	ME OF COMMITTEE (In Full) nerican Hospital Association PAC			
A. <u>Mr.</u>	Il Name (Last, First, Middle Initial) . Spencer Johnson			Date of Receipt
	illing Address 2066 Riverwood Drive			05 19 2008
Cit Ol	y kemos	State MI	Zip Code 48864-2814	Transaction ID: 15496518 Amount of Each Receipt this Period
FE	C ID number of contributing leral political committee.	C	1000 12011	1000.00
Na Mid As	me of Employer chigan Health & Hospital sociation	Occupation Presiden		
	ceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00]
B. <u>Mr</u>	II Name (Last, First, Middle Initial) John Keuten illing Address 570 Brittany Court			Date of Receipt
IVIa	iling Address 570 Brittany Court			05 19 2008
Cit	y ochester Hills	State MI	Zip Code 48309-2613	Transaction ID: 15496522
FE	C ID number of contributing leral political committee.	C	40309-2013	Amount of Each Receipt this Period 250.00
Na Oa	me of Employer akwood Healthcare, Inc.	Occupation Presiden		
Re	ceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
	Il Name (Last, First, Middle Initial) nstance Deneweth			Date of Receipt
Ma	iling Address 9590 Edgewood Avenu	ie		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Cit	y averse City	State MI	Zip Code 49684-8171	Transaction ID: 15496524
FE	C ID number of contributing leral political committee.	C	49004-8171	Amount of Each Receipt this Period 250.00
Na Mu	me of Employer unson Healthcare	Occupation Trustee	n	
Re	ceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUB	FOTAL of Receipts This Page (optional)			1500.00
	AL This Period (last page this line number of		<u> </u>	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any per ename and address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Α.	Full Name (Last, First, Middle Initial) Mr. Thomas D DeFauw		Date of Receipt
	Mailing Address 1221 Pine Grove Aver		05 19 2008
	City Port Huron	State Zip Code MI 48060-3511	Transaction ID: 15496525
	FEC ID number of contributing federal political committee.	C 48000-3311	Amount of Each Receipt this Period 500.00
	Name of Employer Port Huron Hospital	Occupation President and Chief Executive Offi	cer
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
ь В.	Full Name (Last, First, Middle Initial) Chet Czaplicka	Date of Receipt	
	Mailing Address 21668 Beauford Lane	05 19 2008	
	City	State Zip Code	Transaction ID: 15496527
	Northville	MI 48167-9083	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Comprehensive Care Servic- es	Occupation Cardiac Unit Director	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00	
с. С.	Full Name (Last, First, Middle Initial) Mr. Rob Covert		Date of Receipt
	Mailing Address 200 North Madison St	reet	05 19 2008
	City <u>Ma</u> rshall	State Zip Code MI 49068-1143	Transaction ID: 15496528
	FEC ID number of contributing federal political committee.	C 49066-1143	Amount of Each Receipt this Period 250.00
	Name of Employer Oaklawn Hospital	Occupation President and Chief Executive Offi	cer
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)		1000.00
-	TOTAL This Period (last page this line number		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 129 (check only one) X 11a
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may n e name and addre	not be sold or used by any persons of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) Mr. Gerson I Cooper			Date of Receipt
	Mailing Address 1924 Sherwood Glen	Chata	7:n Oada	05 19 2008
	City Bloomfield Hills	State MI	Zip Code 48302-1772	Transaction ID: 15496529 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40002-1772	500.00
	Name of Employer Botsford Continuum	Occupation Health Sys	tem CEO	
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	rear-to-Date ▼ 500.00	
Б.	Full Name (Last, First, Middle Initial) Mr. Brian M Connolly Mailing Address One Parklane Blvd, St	Date of Receipt		
	Maining Addicess Offe Parkiatie Bivd, St	05 19 2008		
	City	State	Zip Code	Transaction ID: 15496532
	Dearborn	MI	48126-4241	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Oakwood Healthcare, Inc.	1	and Chief Executive Office	r
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 500.00	
с. С.	Full Name (Last, First, Middle Initial) Ms. Barbara J Cliff	Date of Receipt		
	Mailing Address 4583 Blue Jay Avenue	05 19 2008		
	City Cheboygan	State MI	Zip Code 49721-0419	Transaction ID: 15496533 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	43/21-0413	250.00
	Name of Employer Cheboygan Memorial Hospit- al	Occupation President a	and Chief Executive Office	r
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)	1		1250.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	nd Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Barton Buxton Mailing Address 1018 Grandview Di City Rochester Hills FEC ID number of contributing federal political committee. Name of Employer Lapeer Regional Medical Center	State Zip Code MI 48306-4027 C Occupation President and Chief Executive Officer	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
Full Name (Last, First, Middle Initial) Mr. Richard C Breon Mailing Address 4177 Thousand Oa City	ıks NE State Zip Code	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Grand Rapids FEC ID number of contributing federal political committee. Name of Employer	MI 49525-9410 C Occupation	Transaction ID: 15496539 Amount of Each Receipt this Period 500.00
Receipt For: Primary General Other (specify)	President and Chief Executive Officer Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Mr. Paul Bonis Mailing Address 13259 Twin Creek	Lane	Date of Receipt
City Greenville FEC ID number of contributing	State Zip Code MI 48838-2614	Transaction ID: 15496540 Amount of Each Receipt this Period
federal political committee. Name of Employer Spectrum Health	Occupation Chief Executive Officer	250.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (options)	1075.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any or f	y information copied from such Reports and S or commercial purposes, other than using the	Statements may e name and add	not be sold or used by any persitress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Mr. Jim Bogan			Date of Receipt
	Mailing Address 1207 Birch Street			05 19 2008
	City Houghton	State MI	Zip Code 49931-1652	Transaction ID: 15496541 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Portage Health	Occupation President	n t and Chief Executive Office	er
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Dr. Brooks Bock, , M.D.	Date of Receipt		
	Mailing Address 5764 Bloomfield Glen	05 19 2008		
	City	State	Zip Code	Transaction ID: 15496542
	West Bloomfield FEC ID number of contributing federal political committee.	C	48322-2501	Amount of Each Receipt this Period 250.00
	Name of Employer Harper University Hospital	Occupation President		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Elizabeth L Aderholdt			Date of Receipt
	Mailing Address 8077 Hawkcrest Drive	05 19 2008		
	City Grand Blanc	State MI	Zip Code	Transaction ID: 15496545
	FEC ID number of contributing federal political committee.	C	48439-2422	Amount of Each Receipt this Period 250.00
	Name of Employer Genesys Regional Medical Center	Occupation President		
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	
		1		750.00

or for c	commercial burboses, other than using the r	tements may not be sold or used by any persor	13 14 15 16 17 for the purpose of soliciting contributions
NA	ME OF COMMITTEE (In Full) nerican Hospital Association PAC	ame and address of any political committee to s	solicit contributions from such committee.
A. <u>Mr.</u>	Name (Last, First, Middle Initial) Charles D. Kohlruss ling Address 946 Meadow Lark Cour		Date of Receipt
	mig Address 946 Meadow Lark Cour		05 19 2008
City		State Zip Code	Transaction ID: 15496546
FE	Iland C ID number of contributing eral political committee.	MI 49424-6602	Amount of Each Receipt this Period 500.00
Nar Hol	ne of Employer land Hospital	Occupation Vice President, Human Resources	_
Rec	ceipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	Name (Last, First, Middle Initial) Mark D. Kolins, MD		Date of Receipt
Mai	ling Address 777 Overhill Road		05 19 2008
City <u>Blo</u>	oomfield Village	State Zip Code MI 48301-2571	Transaction ID: 15496547 Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	C	250.00
Nar Bea	ne of Employer aumont Hospital - Troy	Occupation Administrator	
Rec	ceipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	Name (Last, First, Middle Initial) Donald C Kooy		Date of Receipt
Mai	ling Address 3044 Wynns Mill Pt.		05 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State Zip Code	Transaction ID: 15496548
FE	etamora CID number of contributing Beral political committee.	MI 48455-8980	Amount of Each Receipt this Period 500.00
Mc <u>Ce</u>	ne of Employer Laren Regional Medical nter	Occupation President and Chief Executive Officer	
Rec	ceipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBT	OTAL of Receipts This Page (optional)	>	1250.00

TOTAL This Period (last page this line number only)

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16 11
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements ma name and ad	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Mr Dennis Krzeminski Mailing Address 22526 Porter City Novi	State MI	Zip Code 48374-3732	Date of Receipt 0 5 1 9 2 0 0 8 Transaction ID: 15496549 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer McLaren Health Care Corpo- ration Receipt For: Primary General Other (specify) ▼	Senior V	ice President and Chief Fina e Year-to-Date ▼ 500.00	nd
- 3.	Full Name (Last, First, Middle Initial) Dr. James Kure Mailing Address 10140 Halsey Road			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Grand Blanc	State MI	Zip Code 48439-8208	Transaction ID: 15496550 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Genesys Health System		Cardiology	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00]
- :-	Full Name (Last, First, Middle Initial) Mr. Paul E. LaCasse, , DO Mailing Address 6520 Commerce Road			Date of Receipt
	City	State	Zip Code	0 5 1 9 2 0 0 8 Transaction ID: 15496551
	West Bloomfield	MI	48324-2714	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Botsford Hospital		t & Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			1500.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAG	nd Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Patrick Lamberti Mailing Address 54570 Coventry La City Shelby Township FEC ID number of contributing federal political committee. Name of Employer POH Regional Medical Center	State Zip Code MI 48315-1620 C Occupation Chief Executive Officer	Date of Receipt M M M
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Gregory R. Lane Mailing Address 1596 South Hill Circ City	cle State Zip Code	Date of Receipt M M
Bloomfield FEC ID number of contributing federal political committee.	MI 48304-1121	Amount of Each Receipt this Period 500.00
Name of Employer McLaren Health Care Corpo- ration Receipt For: Primary General Other (specify) ▼	Occupation Sr. Vice President Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Jim Lee Mailing Address 803 Greenwich Driv	ve	Date of Receipt
City Grand Ledge	State Zip Code MI 48837-2411	Transaction ID: 15496560 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Michigan Health & Hospital Association	Occupation VP, Data Policy	500.00
Association Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	al)	1500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16 17			
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any persor name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.			
American Hospital Association PAC					
Full Name (Last, First, Middle Initial) Mr. Gary LeRoy Mailing Address 4158 Quaker Hill Drive		Date of Receipt			
City	State Zip Code	0 5 1 9 2 0 0 8 Transaction ID: 15496564			
Fort Gratiot	MI 48059-4036	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	250.00			
Name of Employer Port Huron Hospital	Occupation Healthcare Consultant]			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00				
Full Name (Last, First, Middle Initial) Ms. Marilyn Litka-Klein					
Mailing Address 16930 Pine Hollow Dri	05 19 2008				
City	State Zip Code	Transaction ID: 15496566			
East Lansing	MI 48823-9664	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	500.00			
Name of Employer Michigan Health & Hospital Association	Occupation Sr. Director, Health Finance				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00				
Full Name (Last, First, Middle Initial) Mr. Kenneth J Matzick		Date of Receipt			
Mailing Address 22500 Lavon		05 / 19 / 2008			
City	State Zip Code	Transaction ID: 15496568			
Saint Clair Shores	MI 48081-2076	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	500.00			
Name of Employer Beaumont Hospital - Royal Oak	Occupation President and Chief Executive Officer				
Receipt For:	Aggregate Year-to-Date ▼				
Primary General Other (specify) ▼	500.00				
SUBTOTAL of Receipts This Page (optional)		1250.00			
TOTAL This Period (last page this line number					

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16 17
0	ny information copied from such Reports and St r for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
4 .	Full Name (Last, First, Middle Initial) Mr. Philip H McCorkle, , Jr. Mailing Address 200 Jefferson Avenue S	SE		Date of Receipt
		JL		05 19 2008
	City	State	Zip Code	Transaction ID: 15496569
	Grand Rapids	MI	49503-4502	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Saint Mary's Health Care	Occupatio Presiden	n t and Chief Executive Office	r
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
 3.	Full Name (Last, First, Middle Initial) Ms. Nancy McKeague			Date of Receipt
	Mailing Address 627 N Harrison			05 19 2008
	City	State	Zip Code	Transaction ID: 15496570
	East Lansing	MI	48823-3017	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		750.00
	Name of Employer Michigan Health & Hospital Association		ice President	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	-
	Other (specify)		750.00	
 ;.	Full Name (Last, First, Middle Initial) Ms. Barbara Medvec			Date of Receipt
	Mailing Address 5686 Briar Glen			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 15496571
	Saline	MI	48176-9537	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Oakwood Healthcare, Inc.	Occupatio Chief Nu	n rsing Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			1500.00
	TOTAL This Period (last page this line number of		<u> </u>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16
An	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any per- name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
	American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. Terence F Moore Mailing Address 4005 Orchard Drive		Date of Receipt
	City	State Zip Code	0 5 1 9 2 0 0 8 Transaction ID: 15496572
	Midland	MI 48670-0001	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer MidMichigan Health	Occupation President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Mr. Chad Noble		Date of Receipt
	Mailing Address 850 Thorntree Bouleva	05 19 2008	
	City	State Zip Code	Transaction ID: 15496576
	Jackson FEC ID number of contributing federal political committee.	MI 49203-2518	Amount of Each Receipt this Period 250.00
	Name of Employer Foote Health System	Occupation Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Ms. Francine M. Padgett		Date of Receipt
	Mailing Address 21 Hunter's Ridge	05 19 2008	
	City	State Zip Code MI 48609-9318	Transaction ID: 15496578
	Saginaw FEC ID number of contributing federal political committee.	MI 48609-9318	Amount of Each Receipt this Period 250.00
	Name of Employer MidMichigan Medical Cente- r-Midland	Occupation Controller	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	LIPTOTAL of Possints This Page (entional)		750.00

Grand Haven FEC ID number of contributing federal political committee. Name of Employer Holland Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Brian Peters Mailing Address 3051 Crofton Dr. City St Dewitt M FEC ID number of contributing federal political committee. C	ate Zip Code	Date of Receipt 0 5 1 9 2 0 0 8
Mr. Mark Pawlak Mailing Address 15277 Meadowwood City St Grand Haven M FEC ID number of contributing federal political committee. Name of Employer Holland Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Brian Peters Mailing Address 3051 Crofton Dr. City St Dewitt M FEC ID number of contributing federal political committee. C C C C C C C C C C C C C	•	05 19 / Y Y Y Y Y Y
Grand Haven FEC ID number of contributing federal political committee. Name of Employer Holland Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Brian Peters Mailing Address 3051 Crofton Dr. City St Dewitt M FEC ID number of contributing federal political committee. C C City Committee C C C C C C C C C C C C	•	
FEC ID number of contributing federal political committee. Name of Employer Holland Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Brian Peters Mailing Address 3051 Crofton Dr. City St Dewitt M FEC ID number of contributing federal political committee. C Coccurrence Coccurrence Agg Primary General Other (specify) ▼ Coccurrence Agg Coccurrence Coccur	49417-9684	Transaction ID: 15496579
Receipt For: Primary Other (specify) Full Name (Last, First, Middle Initial) Mr. Brian Peters Mailing Address 3051 Crofton Dr. City Dewitt FEC ID number of contributing federal political committee. City C		Amount of Each Receipt this Period 500.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Brian Peters Mailing Address 3051 Crofton Dr. City St Dewitt M FEC ID number of contributing federal political committee. Code	upation e President	
Mr. Brian Peters Mailing Address 3051 Crofton Dr. City St Dewitt M FEC ID number of contributing federal political committee. C	regate Year-to-Date ▼ 500.00	
Dewitt M FEC ID number of contributing federal political committee. C		Date of Receipt
Dewitt M FEC ID number of contributing federal political committee. C	ate Zip Code	05 19 2008
FEC ID number of contributing federal political committee.	·	Transaction ID: 15496581 Amount of Each Receipt this Period
Name of Employer		750.00
Michigan Health & Hospital Ser	upation nior Corporate Vice President	
Primary General Other (specify)	regate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Mr. William Peterson		Date of Receipt
Mailing Address 2665 Daleview Drive		05 19 Y Y Y Y Y Y
City	ate Zip Code	Transaction ID: 15496582
Ann Arbor M	48105-9603	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		500.00
McLaren Health Care Corpo- ration VP,	upation Employee & Labor Relations	
Receipt For: Primary General Other (specify) ▼	regate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1750.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 129 (check only one) X
\ \ \	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ . .	Full Name (Last, First, Middle Initial) Mrs. Donna J. Rapp Mailing Address 4400 N. Waldo Road	Chata	7:n Code	Date of Receipt 0 5 1 9 2 0 0 8
	City Midland	State MI	Zip Code 48642-9719	Transaction ID: 15496584 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40042-3713	250.00
	Name of Employer MidMichigan Medical Cente- r-Midland Receipt For: Primary General Other (specify)	Occupation Healthca Aggregate]
3.	Full Name (Last, First, Middle Initial) Mr. Richard M Reynolds Mailing Address 3467 N. Sunset Way	l		Date of Receipt 0 5 1 9 2 0 0 8
	City	State	Zip Code	Transaction ID: 15496585
	<u>Sanford</u>	MI	48657-9583	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer MidMichigan Medical Cente- r-Midland	Occupation Presiden	t	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00]
_	Full Name (Last, First, Middle Initial) Mr. Brian L. Rodgers			Date of Receipt
	Mailing Address 3979 N. Perrine Road			05 19 YYYY 2008
	City	State	Zip Code	Transaction ID: 15496588
	Midland	MI	48642-8336	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer MidMichigan Health		ice President	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)	1		1000.00

or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial)	Statements may not be sold or used by any person e name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
Mr. Gregory H. Rogers Mailing Address 4005 Orchard Drive	Out. To Out.	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Midland	State Zip Code MI 48670-0001	Transaction ID: 15496589
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
Name of Employer MidMichigan Medical Cente- r-Midland Receipt For: Primary General Other (specify) ▼	Occupation Senior VP & Treasurer Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Ms. Nancy M Schlichting Mailing Address One Ford Place		Date of Receipt 0 5 1 9 2 0 0 8
City	State Zip Code	Transaction ID: 15496592
Detroit	MI 48202-3450	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Henry Ford Health System	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr. Peter J. Schonfeld		Date of Receipt
Mailing Address 7105 Cutler Road		05 19 2008
City	State Zip Code	Transaction ID: 15496593
Bath FEC ID number of contributing federal political committee.	MI 48808-9439	Amount of Each Receipt this Period 416.63
Name of Employer Michigan Health & Hospital Association	Occupation Sr. Vice President, Policy & Data Svcs	<u>-</u>
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 499.96	
SUBTOTAL of Receipts This Page (optional) .	>	1666.63

ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any persor the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. David Seaman Mailing Address 805 Ledge Moor Blv City Grand Ledge	rd. State Zip Code MI 48837-2037	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee.	C 48637-2037	Amount of Each Receipt this Period 750.00
Name of Employer Michigan Health & Hospital Association Receipt For: Primary General Other (specify)	Occupation Executive Vice President Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Mr. Dale Sowders Mailing Address 1093 Jill Louise Cou	ırt	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15496600
Holland FEC ID number of contributing federal political committee.	MI 49424-5321	Amount of Each Receipt this Period 500.00
Name of Employer Holland Hospital	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Paul A Spaude, , FACHE		Date of Receipt
Mailing Address 6354 East Bay Lane)	05 19 2008
City Richland	State Zip Code MI 49083-8707	Transaction ID: 15496601 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	600.00
Name of Employer Borgess Health Alliance	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (optional) >	1850.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 55 / 129 (check only one) X
An	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any persor name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Mr Terry L Steele Mailing Address 391 Troon Court City	State Zip Code	Date of Receipt M
	Holland	MI 49423-8830	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Holland Hospital Receipt For: Primary General Other (specify) ▼	Occupation Vice President Finance and Chief Fina Aggregate Year-to-Date ▼ 500.00	an
3.	Full Name (Last, First, Middle Initial) Mr. Joseph D. Stephansky Mailing Address 818 Cowley Ave		Date of Receipt 0 5 1 9 2 0 0 8
	City	State Zip Code	Transaction ID: 15496603
	East Lansing	MI 48823-3012	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Michigan Health & Hospital Association Receipt For:	Occupation Director, Client Services Aggregate Year-to-Date	
	Primary General Other (specify) ▼	250.00	
	Full Name (Last, First, Middle Initial) Mr. Douglas Strong		Date of Receipt
	Mailing Address 1500 East Medical Cer	nter Drive	05 19 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 15496613
	Ann Arbor	MI 48109-0999	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer University of Michigan Ho- spitals and H	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
S.	UBTOTAL of Receipts This Page (optional)	······	1250.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56/129 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		a coo or any poniosa committee to	
Full Name (Last, First, Middle Initial) Mr. Dennis A Swan			Date of Receipt
Mailing Address 3741 Chippendale	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Okemos	State MI	Zip Code 48864-3861	Transaction ID: 15496614 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer Sparrow Hospital	Occupatio Presiden	n t and Chief Executive Office	 r
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Mark R Taylor			Date of Receipt
Mailing Address 16 Dodge Place			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Grosse Pointe	State MI	Zip Code 48230-1939	Transaction ID: 15496615
FEC ID number of contributing federal political committee.	C	40230-1939	Amount of Each Receipt this Period 750.00
Name of Employer Genesys Health System	Occupatio Presiden		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Kevin B Tompkins			Date of Receipt
Mailing Address 8110 Cotswold Lane	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State	Zip Code	Transaction ID: 15496616
Clarkston FEC ID number of contributing federal political committee.	C	48348-4363	Amount of Each Receipt this Period 500.00
Name of Employer McLaren Health Care Corpo- ration	Occupatio Vice Pres	sident	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00]
SUBTOTAL of Receipts This Page (optional	_		1750.00

	LE A (FEC Form 3X) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57 / 129 (check only one) X
or for commer	on copied from such Reports and Sicial purposes, other than using the COMMITTEE (In Full) n Hospital Association PAC	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Mrs. Patti V	(Last, First, Middle Initial) an Dort dress 2629 Floral Drive	State MI	Zip Code	Date of Receipt M
FEC ID nu federal poli	mber of contributing tical committee.	C	49464-9107	Amount of Each Receipt this Period 500.00
Name of E Holland Ho Receipt Fo Prim Othe	r:	Occupation VP Nursi Aggregate		
Mr. Matthew	(Last, First, Middle Initial) v G VanVranken dress 5669 Watermark Ct. S	E		Date of Receipt 0 5 1 9 2 0 0 8
City		State	Zip Code	Transaction ID: 15496619
	apids mber of contributing tical committee.	C	49546-6487	Amount of Each Receipt this Period 500.00
Name of E Spectrum	mployer Health	Occupation Healthca	n re Administration	
Receipt Fo			e Year-to-Date ▼ 500.00	
Full Name Mr. Henry A	(Last, First, Middle Initial) A Veenstra			Date of Receipt
Mailing Ad	dress 10641 Fawn View Cou	rt		05 19 2008
City		State	Zip Code	Transaction ID: 15496620
	mber of contributing tical committee.	C	49464-6834	Amount of Each Receipt this Period 250.00
Name of E Zeeland C	mployer ommunity Hospital	Occupation Presiden		
Receipt Fo			e Year-to-Date ▼ 250.00	
SUBTOTAL	of Receipts This Page (optional)			1250.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
<u> </u>	Full Name (Last, First, Middle Initial) Mr. Kevin Walker			Date of Receipt
	Mailing Address 13268 Speckledwood I			05 19 2008
	City	State	Zip Code	Transaction ID: 15496622
	Dewitt FEC ID number of contributing federal political committee.	C	48820-8165	Amount of Each Receipt this Period 375.00
	Name of Employer FinCor (MHA Insurance Co- mpany)	Occupatio Vice Pre		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	375.00	
— В.	Full Name (Last, First, Middle Initial) Mr. Joseph A Wasserman			Date of Receipt
	Mailing Address 1009 St. Joseph Drive			05 19 2008
	City	State	Zip Code	Transaction ID: 15496623
	Saint Joseph	MI	49085-2533	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Lakeland Regional Health System	Occupatio Presiden	n It and Chief Executive Office	r
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
 c.	Full Name (Last, First, Middle Initial) Mr. Sam R. Watson			Date of Receipt
	Mailing Address 1240 E. Mill Street			05 19 / Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 15496624
	Hastings	MI	49058-9185	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Michigan Health & Hospital Association		e Executive Director	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	7
	Other (specify)		500.00	
s	UBTOTAL of Receipts This Page (optional)			1375.00
T.	OTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59 / 129 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any pers name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr Douglas D Welday Mailing Address 32468 Sandstone Ct. City	State Zip Code	Date of Receipt M
Farmington Hills	MI 48334-4321	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	325.00
Name of Employer Oakwood Healthcare, Inc. Receipt For: Primary Other (specify) ▼	Occupation Chief Financial Officer Aggregate Year-to-Date 325.00	
Full Name (Last, First, Middle Initial) Ms. Mary Zatina Mailing Address 605 Chicago Boulevard	d	Date of Receipt 0 5 1 9 2 0 0 8
City	State Zip Code	Transaction ID: 15496627
Detroit	MI 48202-1414	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Oakwood Healthcare, Inc.	Occupation SVP, Gov't Rel, Corp Planning & Co	ommun
Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mrs. Sylvia Hagenlocker		Date of Receipt
Mailing Address 290 Lone Pine Rd.		05 19 / Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15496631
Bloomfield Hills	MI 48304-3543	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer Beaumont Hospital - Royal Oak	Occupation Volunteer	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		825.00

ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 60 / 129 (check only one)
Any information copied from such Reports and or for commercial purposes, other than using t	Statements may	up on the sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		, , ,	
Full Name (Last, First, Middle Initial) Mr. Paul B. Lerg			Date of Receipt
Mailing Address P. O. Box 332 350 Red Tailed Hawl	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Grayling	State MI	Zip Code 49738-0332	Transaction ID: 15496635 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Mercy Hospital Grayling	Occupation Trustee	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Madeleine Roberson			Date of Receipt
Mailing Address 5402 S Fulton Court			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Greenwood Village	State CO	Zip Code 80111-3660	Transaction ID: 15503302
FEC ID number of contributing federal political committee.	C	00111-5000	Amount of Each Receipt this Period 250.00
Name of Employer Presbyterian-St. Luke's Medical Center Receipt For: Primary General Other (specify) ▼	_ '	n t and Chief Executive Office e Year-to-Date ▼ 250.00	r
Full Name (Last, First, Middle Initial) Ms. Mary Henrikson			Date of Receipt
Mailing Address 2718 Havasupai Ave)		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 15503429
San Diego FEC ID number of contributing federal political committee.	CA	92117-1632	Amount of Each Receipt this Period 500.00
Name of Employer Sharp Mary Birch Hospital For Women		ecutive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00]
SUBTOTAL of Receipts This Page (optional)	<u> </u>		1250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Dennis J Phillips Mailing Address 4310 - 4th Street Circl	e NIW	Date of Receipt
City	State Zip Code	05 27 2008
Hickory	NC 28601-9021	Transaction ID: 15505318 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Carolinas Medical Center	Occupation Senior Vice President, Operations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Larry J Unroe		Date of Receipt
Mailing Address 401 Matthew Street		05 19 2008
City	State Zip Code	Transaction ID: 15505567
Marietta FEC ID number of contributing federal political committee.	OH 45750-1699	Amount of Each Receipt this Period 250.00
Name of Employer Marietta Memorial Hospital	Occupation President	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	250.00	
Full Name (Last, First, Middle Initial) Mr. Paul Prachum		Date of Receipt
Mailing Address 103 Windy Pointe Driv	/e	05 19 2008
City Marietta	State Zip Code OH 45750	Transaction ID: 15505568 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Marietta Memorial Hospital	Occupation Medical Director, Radiology Department	ent
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1100.00
TOTAL This Period (last page this line number	<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 129 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any pers le name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. David Jimenez Mailing Address 488 E. Lower Springl	poro Road	Date of Receipt 0 5 2 7 2 0 0 8
City	State Zip Code	Transaction ID: 15508812
Springboro FEC ID number of contributing federal political committee.	OH 45066-9545	Amount of Each Receipt this Period 1000.00
Name of Employer Catholic Healthcare Partners Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Chief Operating Officer Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Ms. Deborah K Zastocki, , FACHE Mailing Address 97 West Parkway		Date of Receipt 0 5 2 7 2 0 0 8
City	State Zip Code	Transaction ID: 15508882
Pompton Plains FEC ID number of contributing federal political committee.	NJ 07444-1647	Amount of Each Receipt this Period 350.00
Name of Employer Chilton Memorial Hospital	Occupation President and Chief Executive Office	er
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Kathy J Bobbs		Date of Receipt
Mailing Address 109 East Peck Blvd		05 27 2008
City Lafayette	State Zip Code LA 70508-7473	Transaction ID: 15508884 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Women's and Children's Ho- spital	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1850.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 63 / 129 (check only one) X
A o	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Mr. George Massar Mailing Address 820 Abingdon Lane City Bowling Green FEC ID number of contributing federal political committee. Name of Employer	State Zip Code OH 43402-8517 C	Date of Receipt M M D D Y Y Y Y Y Y Y Y
_	Name of Employer Wood County Hospital Receipt For: Primary General Other (specify)	Vice President, Operations Aggregate Year-to-Date ▼ 250.00]
3.	Full Name (Last, First, Middle Initial) Mr. Stanley R Korducki Mailing Address 950 West Wooster Str	eet	Date of Receipt M M D D Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 15509394
	Bowling Green FEC ID number of contributing	OH 43402-2603	Amount of Each Receipt this Period
	federal political committee.	C	500.00
	Name of Employer Wood County Hospital	Occupation President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00]
_	Full Name (Last, First, Middle Initial) Ms. Mary M. Yost		Date of Receipt
•	Mailing Address 924 Riva Ridge Boulev	ard	05 19 2008
	City	State Zip Code	Transaction ID: 15509405
	Gahanna	OH 43230-3825	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Ohio Hospital Association	Occupation Vice President, Public Affairs	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)		1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 64 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using t	Statements may not be sold or used by any person he name and address of any political committee to	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Dwight L. Fine		Date of Receipt
Mailing Address 12675 Riviera Heigh City	ts Road State Zip Code	05 27 2008
Holts Summit	MO 65043-2039	Transaction ID: 15509669 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	111.12
Name of Employer Missouri Hospital Associa- tion	Occupation Sr. Vice President, Health Policy	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 555.60	
Full Name (Last, First, Middle Initial) Mr. Marc D. Smith		Date of Receipt
Mailing Address 5612 Tanner Bridge	Road	05 27 7 2008
City	State Zip Code	Transaction ID: 15509684
Jefferson City	MO 65101-8275	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	111.12
Name of Employer Missouri Hospital Associa- tion	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 555.60	
Full Name (Last, First, Middle Initial) Mr. Anthony J Cooper, , FACHE		Date of Receipt
Mailing Address 892 Upland Drive		05 29 2008
City	State Zip Code	Transaction ID: 15513092
<u>Elmira</u>	NY 14905-1421	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Arnot Ogden Medical Center	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		722.24
TOTAL This Period (last page this line numb	<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any persor name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Edward H Lamb, , FACHE		Date of Receipt
Mailing Address 4831 Southpark Bluff D		05 29 2008
City Anchorage	State Zip Code AK 99516-4865	Transaction ID: 15513094 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Alaska Regional Hospital	Occupation President and Chief Executive Officer	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Randall D Oostra, , FACHE		Date of Receipt
Mailing Address 21 Tremore Way		05 19 2008
City	State Zip Code	Transaction ID: 15516172
Holland	OH 44870-6081	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer ProMedica Health System	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Andrew S. Davidson		Date of Receipt
Mailing Address 2123 Ridgebrook Drive	;	05 27 YYYY 2008
City	State Zip Code	Transaction ID: 15516197
West Linn FEC ID number of contributing federal political committee.	OR 97068-1943	Amount of Each Receipt this Period 500.00
Name of Employer Oregon Association of Hos- pitals & Heal	Occupation President & CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1250.00
TOTAL This Period (last page this line number	<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 66 / 129 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may ne name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Dr. Nicholas Wolter, , M.D.			Date of Receipt
Mailing Address P O Box 37000 City	State	Zip Code	0 5 2 7 2 0 0 8 Transaction ID: 15516213
Billings FEC ID number of contributing federal political committee.	C	59107-7000	Amount of Each Receipt this Period 1000.00
Name of Employer Billings Clinic Receipt For:	_ '	ecutive Officer	
Primary General Other (specify) ▼	7 iggregate	1000.00	
Full Name (Last, First, Middle Initial) Mr. William L Welch, , FACHE Mailing Address P O Box 277	-		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 15516216
<u>Fairbury</u>	NE	68352-0277	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Jefferson Community Health Center	Occupation Chief Exe	n ecutive Officer	
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Laura J. Redoutey, FACHE			Date of Receipt
Mailing Address 1863 Folkways			05 23 2008
City	State	Zip Code	Transaction ID: 15516299
Lincoln FEC ID number of contributing federal political committee.	C	68521-5077	Amount of Each Receipt this Period 1000.00
Name of Employer Nebraska Hospital Associa- tion	Occupation President	t	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)			2250.00
TOTAL This Period (last page this line number	er only)		

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 67 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16
ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persie name and address of any political committee t	son for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Dr. Steve Smart, DDS		Date of Receipt
Mailing Address 120 Shadyside		05 30 Y Y Y Y Y
City <u>El Dorado</u>	State Zip Code AR 71730-3147	Transaction ID: 15516303 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Medical Center of South Arkansas	Occupation Chairman of the Board	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Mr. Lindsay Mac Robinson Mailing Address 107 East Lane		Date of Receipt
City	State Zip Code	0 5 2 3 2 0 0 8 Transaction ID: 15516307
Lake Barrington	IL 60010-1939	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	39.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, PMGs	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Mr. J. Michael Horsley	_L	Date of Receipt
Mailing Address 8107 Henslow Court		05 30 2008
City	State Zip Code	Transaction ID: 15516319
Montgomery FEC ID number of contributing federal political committee.	AL 36117-7475	Amount of Each Receipt this Period 1000.00
Name of Employer Alabama Hospital Associat- ion	Occupation President and Chief Executive Office	er
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
CURTOTAL of Possints This Page (antional)		2039.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 68 / 129 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	statements may not be sold or used by any pers name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. James F Hanko Mailing Address 1300 Anne St. NW City Bemidji FEC ID number of contributing federal political committee. Name of Employer North Country Regional Hospital Receipt For:	State Zip Code MN 56601 C Occupation President and Chief Executive Office Aggregate Year-to-Date	Date of Receipt M M
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	375.00	
Mr. Lawrence J Massa Mailing Address 301 Becker Avenue SV	N	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15519370
Willmar	MN 56201-3395	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Rice Memorial Hospital	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Mr. Christopher S. Bailey		Date of Receipt
Mailing Address 2814 Northlake Drive		05 27 2008
City	State Zip Code	Transaction ID: 15525402
Richmond	VA 23233-3320	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Virginia Hospital & Healt- hcare Associa Receipt For: Primary General Other (specify) ▼	Occupation Senior Vice President Aggregate Year-to-Date 350.00	
SUBTOTAL of Receipts This Page (optional)		687.50

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 69 / 129 (check only one)
Any information copied from such Reports at or for commercial purposes, other than using	nd Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PA	<u> </u>	areas or any political committee to	SOIGH SOITH BUILDING TOTAL SUCT COMMITTEES.
Full Name (Last, First, Middle Initial) Ms. Katharine M. Webb			Date of Receipt
Mailing Address 14 Bridgeway Road	d		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Richmond	State VA	Zip Code 23226-3302	Transaction ID: 15525406 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		350.00
Name of Employer Virginia Hospital & Healt- hcare Associa	Occupation Senior V	n ice President	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Kenneth M. Krakaur			Date of Receipt
Mailing Address 108 Burwell Court			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Williamsburg	State VA	Zip Code 23185-6507	Transaction ID: 15525407 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20100 0007	350.00
Name of Employer Sentara Healthcare	Occupation Sr. Vice	n President	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Paul A. Speidell			Date of Receipt
Mailing Address 4200 Innslake Driv	е		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Glen Allen	State VA	Zip Code 23060-6712	Transaction ID: 15526433
FEC ID number of contributing federal political committee.	C	23000-0712	Amount of Each Receipt this Period 350.00
Name of Employer Virginia Hospital & Healt- hcare Associa	Occupation Vice Pres	sident	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00]
SUBTOTAL of Receipts This Page (options	-0		1050.00

ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 70 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Laurens Sartoris		Date of Receipt
Mailing Address 7 East Glenbrooke Ci City	rcle State Zip Code	05 27 2008
Richmond	VA 23229-8001	Transaction ID: 15526435 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Virginia Hospital & Healt- hcare Associa	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. E. George Middleton, Jr.		Date of Receipt
Mailing Address 1518 South Sea Bree.	ze Trail	05 27 2008
City	State Zip Code	Transaction ID: 15526437
Virginia Beach	VA 23452-4748	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Central Healthcare	Occupation Trustee	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Robin Depaoli		Date of Receipt
Mailing Address 8317 Stonewall Drive		05 27 Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15527277
Vienna	VA 22180-6949	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	350.00
Name of Employer Virginia Hospital Center - Arlington	Occupation Senior Vice President & CFO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
SUBTOTAL of Receipts This Page (optional) .		1050.00
TOTAL This Period (last page this line number	·	

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 71 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16
ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any per e name and address of any political committee	son for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) F Dixon Whitworth		Date of Receipt
Mailing Address 14 S Washington Str		05 27 2008
City Winchester	State Zip Code VA 22601-4130	Transaction ID: 15527282 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Community Memorial Health- center	Occupation Board Chairman	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Sandra J. Miller Mailing Address 379 Dorwin Drive	.1	Date of Receipt
		05 27 2008
City	State Zip Code	Transaction ID: 15527283
Norfolk FEC ID number of contributing federal political committee.	VA 23502-5707	Amount of Each Receipt this Period 350.00
Name of Employer Sentara Healthcare	Occupation Director, Gov't Relations and Advoc	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Elizabeth Long		Date of Receipt
Mailing Address 7723 Stuart Hall Roa	d	05 27 2008
City Richmond	State Zip Code VA 23229-6615	Transaction ID: 15527758
FEC ID number of contributing federal political committee.	VA 23229-6615	Amount of Each Receipt this Period 350.00
Name of Employer Virginia Hospital & Healt- hcare Associa	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)	1	1050.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	f	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 72 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not e name and address	be sold or used by any persons of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) Mr. James B Cole			Date of Receipt
	Mailing Address 39651 Clifton Manor F		7'- 0-1-	05 27 2008
	City <u>Haymarket</u>	State VA	Zip Code 20169	Transaction ID: 15527759 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20109	350.00
	Name of Employer Virginia Hospital Center - Arlington	Occupation Chief Execut	ive Officer	
	Receipt For: Primary General Other (specify)	Aggregate Yea	ar-to-Date ▼ 350.00	
В.	Full Name (Last, First, Middle Initial) Mr. Donald L. Harris Mailing Address 5976 Burnside Landin	a Drivo		Date of Receipt
	Mailing Address 5976 Buffiside Laffdiff	05 27 2008		
	City	State	Zip Code	Transaction ID: 15528312
	Burke	VA	22015-2522	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		350.00
	Name of Employer Inova Health System	Occupation Vice Preside	nt, Government Relation	ns
	Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 350.00	
с. С.	Full Name (Last, First, Middle Initial) Ms. Nancy H Agee			Date of Receipt
	Mailing Address 802 Cherrywood Road	b		05 27 2008
	City	State	Zip Code	Transaction ID: 15528886
	Salem	VA	24153-2755	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		350.00
	Name of Employer Carilion Health System	Occupation Chief Operation		
	Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional) .			1050.00
	TOTAL This Period (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 73 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16 17
(Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Mr. W Scott Burnett		Date of Receipt
	Mailing Address 512 Binford Street City	State Zip Code	0 5 2 7 2 0 0 8 Transaction ID: 15528888
	South Hill	VA 23970-1510	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	350.00
	Name of Employer Community Memorial Health- center	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
- 3.	Full Name (Last, First, Middle Initial) Mr. Sean S McMurray, , FACHE		Date of Receipt
	Mailing Address 351 Court Street NE		05 27 2008
	City	State Zip Code	Transaction ID: 15529250
	Abingdon	VA 24210-2955	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	350.00
	Name of Employer Johnston Memorial Hospital	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00]
_	Full Name (Last, First, Middle Initial) Mr. Michael J Schwartz		Date of Receipt
	Mailing Address 7505 Nyack ct.		05 27 2008
	City	State Zip Code	Transaction ID: 15533206
	Manassas	VA 20112-7815	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	350.00
	Name of Employer Prince William Hospital	Occupation President and Chief Executive Office	r
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify)	350.00]
Γ	SUBTOTAL of Receipts This Page (optional)		1050.00
-	SOBTOTAL OF Necelpts This Page (optional)		
	TOTAL This Period (last page this line number	only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 74 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Kevin M. Pitzer		Date of Receipt
Mailing Address 4187 Houkom Court		05 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15542687
<u>Fargo</u>	ND 58104-6002	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Innovis Health	Occupation Chief Operating Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Carol Ashton-Hergenhan		Date of Receipt
Mailing Address 4385 S Woodland Driv	ve	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15542790
Bensalem	PA 19020-4086	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Friends Behavioral Health System	Occupation Board Chair	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Mary M. Fuqua		Date of Receipt
Mailing Address 96 Grandview Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15542814
Williamstown	MA 01267-2528	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Berkshire Health Systems, Inc.	Occupation Trustee Emeritus	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
SUBTOTAL of Receipts This Page (optional)	_	1200.00
TOTAL This Period (last page this line number	<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 75 / 129 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to s	13 14 15 16 for the purpose of soliciting contributions olicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC	, , , , , , , , , , , , , , , , , , ,	
Full Name (Last, First, Middle Initial) Mr. Robert G Norton, , CHE		Date of Receipt
Mailing Address 81 Highland Avenue		05 30 7 2008
City Salem	State Zip Code MA 01970-2768	Transaction ID: 15542820
FEC ID number of contributing federal political committee.	MA 01970-2768	Amount of Each Receipt this Period 1000.00
Name of Employer North Shore Medical Center	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Mr. David J Trull		Date of Receipt
Mailing Address 106 Cliff Road		05 30 2008
City	State Zip Code	Transaction ID: 15542861
Wellesley	MA 02481-3023	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	350.00
Name of Employer Faulkner Hospital	Occupation President and Chief Executive Officer	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Primary ☐ General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Mr. Stephen R. Griffin		Date of Receipt
Mailing Address 600 Wood Pond Road	d	05 30 YYYY 2008
City	State Zip Code	Transaction ID: 15543091
Cheshire	CT 06410-4341	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Saint Mary's Hospital	Occupation Trustee	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
CURTOTAL of Descirts This Dags (entired)	· · · · · · · · · · · · · · · · · · ·	1600.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 76 / 129 (check only one) X
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Todd Krass Mailing Address 11500 Hardy Street City Overland Park FEC ID number of contributing federal political committee. Name of Employer Research Psychiatric Center Receipt For: Primary General Other (specify)	State Zip Code KS 66210-2404 C Occupation Chief Executive Officer Aggregate Year-to-Date 350.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Thomas K. Sager Mailing Address 11 Valleyview Farm R City Haverhill FEC ID number of contributing	State Zip Code MA 01835-7658	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Caritas Holy Family Hospital and Medic Receipt For: Primary Other (specify) ▼	Occupation President and Chief Executive Office Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Mr. Terry G Hoff Mailing Address P O Box 5020		Date of Receipt M
City Minot FEC ID number of contributing federal political committee.	State Zip Code ND 58702-5020	Transaction ID: 15543807 Amount of Each Receipt this Period 250.00
Name of Employer Trinity Health Receipt For: Primary General	Occupation President Aggregate Year-to-Date ▼ 250.00	
Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	0 0 0 0 0 0 0 0	850.00

Any information copied from such Reports and or for commercial purposes, other than using the such as		13 14 15 16 17
NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any perso he name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Ronald R Peterson Mailing Address 733 North Broadway	r, BRB 104	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Baltimore	State Zip Code MD 21205	Transaction ID: 15544868 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Johns Hopkins Health System Receipt For: Primary General Other (specify) ▼	Occupation President Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Christine R Wray Mailing Address 22302 Bretmar Drive)	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15544873
Leonardtown FEC ID number of contributing federal political committee.	MD 20650-2228	Amount of Each Receipt this Period 375.00
Name of Employer St. Mary's Hospital	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) Ms. Joanne E Pollak, , JD		Date of Receipt
Mailing Address 733 North Broadway	, BRB 104	05 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Baltimore	State Zip Code MD 21205	Transaction ID: 15545401 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 21203	250.00
Name of Employer Johns Hopkins Health Syst- em	Occupation Vice President and General Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		875.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	f	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 78 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar	y information copied from such Reports and S for commercial purposes, other than using the	Statements may not e name and addres	t be sold or used by any pers s of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
4 .	Full Name (Last, First, Middle Initial) Mr. Harvey Meyerhoff			Date of Receipt
	Mailing Address 600 North Wolfe Stree			05 27 2008
	City Baltimore	State MD	Zip Code 21287-0005	Transaction ID: 15545412 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Johns Hopkins Hospital	Occupation Trustee		
	Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 250.00	
 3.	Full Name (Last, First, Middle Initial) Mr. Alvin Krongard Moiling Address COO North Wolfe Care			Date of Receipt
	Mailing Address 600 North Wolfe Stree	=		05 27 2008
	City Baltimore	State MD	Zip Code	Transaction ID: 15545413
	FEC ID number of contributing federal political committee.	C	21287-0005	Amount of Each Receipt this Period 250.00
	Name of Employer Johns Hopkins Hospital	Occupation Trustee		
	Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 250.00	
—).	Full Name (Last, First, Middle Initial) Mr. H. Furlong Baldwin			Date of Receipt
	Mailing Address 600 North Wolfe Street	et		05 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 15545414
	Baltimore FEC ID number of contributing federal political committee.	C	21287-0005	Amount of Each Receipt this Period 250.00
	Name of Employer Johns Hopkins Hospital	Occupation Trustee		
	Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 250.00	
s	UBTOTAL of Receipts This Page (optional)	1		750.00
	OTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 79 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Carol Kunau Mailing Address 10123 Southeast Mark City Portland FEC ID number of contributing federal political committee.	State Zip Code OR 97216-2532	Date of Receipt M M M
Name of Employer Adventist Medical Center Receipt For: Primary General Other (specify) ▼	Occupation VP, Patient Care Services Aggregate Year-to-Date 350.00	
Full Name (Last, First, Middle Initial) Ms. Amy Walker, MS., RN Mailing Address 3859 Wekiva Springs	Road	Date of Receipt 0 5 2 3 2 0 0 8
City	State Zip Code	Transaction ID: 15568565
Longwood FEC ID number of contributing federal political committee.	FL 32779-3362	Amount of Each Receipt this Period 1000.00
Name of Employer OptimizelT	Occupation Consultant	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Ms. Patricia A. Cornett		Date of Receipt
Mailing Address 4650 Sunset Blvd. Suite 70		05 23 7 2008
City	State Zip Code	Transaction ID: 15568569
Los Angeles FEC ID number of contributing federal political committee.	CA 90027-6062	Amount of Each Receipt this Period 500.00
Name of Employer Versant	Occupation Senior Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	1	1850.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 80 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Linda K. Groah, RN, MS, FA		Date of Receipt
Mailing Address 2170 South Parker Ro		05 23 2008
City Denver	State Zip Code CO 80231-5734	Transaction ID: 15568570 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 80251-3754	350.00
Name of Employer Association of periOperat- ive Registere Receipt For: Primary General Other (specify) ▼	Occupation Executive Director Aggregate Year-to-Date 350.00	
Full Name (Last, First, Middle Initial) Dr. Holly A. DeGroot Mailing Address 1701 Novato Blvd.		Date of Receipt
Suite 205		05 23 2008
City	State Zip Code	Transaction ID: 15568571
Novato	CA 94947-3000	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Catalyst Systems, LLC	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Deborah Crist-Grundman		Date of Receipt
Mailing Address 16407 High Bluff Cou	rt	05 23 7 2008
City	State Zip Code	Transaction ID: 15568573
Riverside FEC ID number of contributing federal political committee.	CA 92503-0515	Amount of Each Receipt this Period 350.00
Name of Employer Concerro	Occupation Executive Strategist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional) .		1050.00
TOTAL This Period (last page this line number	·	

SCHEDULE A (FEC FOITEMIZED RECEIPTS	Use separate schedule for each category of the Detailed Summary Pag	e (check only one)
Any information copied from such I or for commercial purposes, other to NAME OF COMMITTEE (In Fu American Hospital Associa	•	y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
Full Name (Last, First, Middle Ir Ms. Susan Buckles Mailing Address 104 Space	itial)	Date of Receipt
City Goodlettsville	State Zip Code TN 37072-1852	Transaction ID: 15568816 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer AIONEX Receipt For: Primary General Other (specify) ▼	Occupation Chief Nursing Officer Aggregate Year-to-Date ▼ 350.0	00
Full Name (Last, First, Middle In Ms. T. Jane Kamstra Mailing Address 103 Tuscal	,	Date of Receipt 0 5 2 3 2 0 0 8
City	State Zip Code	Transaction ID: 15568824
Shavano Park FEC ID number of contributing federal political committee.	TX 78249-2061	Amount of Each Receipt this Period 1000.00
Name of Employer CHRISTUS Health	Occupation Regional Director, Perioperative	e Care
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	00
Full Name (Last, First, Middle Ir Ms. Katie Vaughan	itial)	Date of Receipt
Mailing Address 506A East	Howell Avenue	M M / D D / Y Y Y Y
City	State Zip Code	Transaction ID: PR1034595120637
Alexandria FEC ID number of contributing federal political committee.	VA 22301-1216	Amount of Each Receipt this Period 40.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Associate Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.0	P/R Deduction (\$20.00 Bi-Weekly)
SUBTOTAL of Receipts This Pac	e (optional)	1390.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 82 / 129 (check only one) X 11a
A	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may not be sold or used by any persename and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
<u></u>	Full Name (Last, First, Middle Initial) Ms. Melinda Reid Hatton		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700		M M / D D / Y Y Y Y
	City	State Zip Code	Transaction ID: PR1045726220637
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation VP & Chief Washington Counsel	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	429.00	P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Alex White, Jr.	<u> </u>	Date of Receipt
	Mailing Address One North Franklin		M M / D D / Y Y Y Y
	City	State Zip Code	Transaction ID: PR1339349920637
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	116.00
	Name of Employer American Hospital Associa- tion	Occupation Account Executive	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼	638.00	P/R Deduction (\$58.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Frances Margolin		Date of Receipt
	Mailing Address One North Franklin		M M / D D / Y Y Y Y
	City	State Zip Code	Transaction ID: PR1347702720637
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer	Occupation	
	American Hospital Associa- tion-Chicago	Vice President, Operatinos HRET	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼	220.00	P/R Deduction (\$20.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		234.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 83 / 129 (check only one) X 11a
A or	ny information copied from such Reports and S for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
<u>/_</u>	Full Name (Last, First, Middle Initial) Mr. James Wadzinski		Date of Receipt
	Mailing Address One North Franklin		M " M / D " D / Y " Y " Y " Y
	City	State Zip Code IL 60606-3436	Transaction ID: PR1347703420637
	Chicago FEC ID number of contributing federal political committee.	IL 60606-3436	Amount of Each Receipt this Period 40.00
	Name of Employer American Hospital Association-Chicago Receipt For: Primary General	Occupation VP, Operations and Account Services Aggregate Year-to-Date ▼ 220.00	P/R Deduction (\$20.00 Bi-
	Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Jack A. Mackay		Weekly) Date of Receipt
	Mailing Address One North Franklin	M M / D D / Y Y Y Y	
	City	State Zip Code	Transaction ID: PR1347703620637
	Chicago FEC ID number of contributing federal political committee.	IL 60606-3436	Amount of Each Receipt this Period 40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President & CIO	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Catherine D. Sewell		Date of Receipt
	Mailing Address One North Franklin		M M / D D / Y Y Y Y
	City	State Zip Code	Transaction ID: PR1347708420637
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	106.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation Executive Director Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	Aggregate Teal-10-Date V	P/R Deduction (\$53.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional)		186.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 84 / 129 (check only one) X
Any or f	y information copied from such Reports and S or commercial purposes, other than using the	tatements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Mr. John Slotman			Date of Receipt
	Mailing Address 325 Seventh Street, N\ Suite 700	N		M " M / D " D / Y " Y " Y " Y
	City Washington	State DC	Zip Code 20004-2802	Transaction ID: PR1384065320637 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer American Hospital Association-Washingt Receipt For: Primary General Other (specify)		n e Director, Federal Relations year-to-Date ▼ 220.00	P/R Deduction (\$20.00 Bi-Weekly)
	Full Name (Last, First, Middle Initial) Ms. Linda Fishman			Date of Receipt
	Mailing Address 325 Seventh Street, NW Suite 700			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR327629120637
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice Pres	n sident Federal Relations	7
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		429.00	P/R Deduction (\$39.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Lindsay Mac Robinson			Date of Receipt
	Mailing Address 107 East Lane			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR327727320637
	<u>Lake Barrington</u>	<u> </u>	60010-1939	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		39.00
	Name of Employer American Hospital Associa- tion-Chicago	_ '	sident, PMGs	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 429.00	P/R Deduction (\$39.00 Bi- Weekly)
CI CI	JBTOTAL of Receipts This Page (optional)	1	_	157.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 85 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may rename and address	not be sold or used by any persess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Ms. Debbie F. Weiner			Date of Receipt
•	Mailing Address 11004 petersborough I	Drive		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR327745920637
	Rockville	MD	20852-3249	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, G	Grassroots Advocacy	
	Receipt For:	Aggregate Y	'ear-to-Date ▼	
	Primary General Other (specify) ▼		429.00	P/R Deduction (\$39.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Debra J. Stock			Date of Receipt
	Mailing Address 1022 S. Harvey Avenu	ie		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR327777820637
	Oak Park	<u>IL</u>	60304-2132	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer American Hospital Associa-	Occupation Vice Presiden	dent, Member Relations	
	tion-Chicago Receipt For:	, '	'ear-to-Date ▼	
	Primary General Other (specify) ▼	39.53	220.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Neil J. Jesuele	1		Date of Receipt
	Mailing Address 1003 Kimberly Place			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR327801720637
	Great Falls	VA	22066-1546	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Executive	Vice President	
	Receipt For:	Aggregate Y	'ear-to-Date ▼	
	Primary General Other (specify)		220.00	P/R Deduction (\$20.00 Bi- Weekly)
Г	SUBTOTAL of Receipts This Page (optional)	1		158.00

SCHEDULE A (FEC F ITEMIZED RECEIPTS	Use separate sch for each category Detailed Summary	of the (Check Only Only)
Any information copied from such or for commercial purposes, other	Reports and Statements may not be sold or used than using the name and address of any political of	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
NAME OF COMMITTEE (In F American Hospital Associ		
Full Name (Last, First, Middle I Ms. Pamela Austin Thompson, R		Date of Receipt
Mailing Address 325 Sever Suite 700		M " M / D " D / Y " Y " Y " Y
City <u>Washington</u>	State Zip Code DC 20004-2818	Transaction ID: PR327812020637 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	78.00
Name of Employer American Organization of Nurse Executi Receipt For: Primary General Other (specify) ▼		P/R Deduction (\$39.00 Bi-Weekly)
Full Name (Last, First, Middle I Ms. Joan H. Lewis Mailing Address 6034 Nort	nitial)	Date of Receipt
City	State Zip Code	Transaction ID: PR327831720637
Arlington	VA 22205-3408	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Regional Executive	
Receipt For: Primary Genera Other (specify) ▼		P/R Deduction (\$20.00 Bi- Weekly)
Full Name (Last, First, Middle I Ms. Ellen A. Pryga	nitial)	Date of Receipt
Mailing Address 2401 Calv Apt. 1008	ert Street, NW	M " M / D " D / Y " Y " Y " Y
City	State Zip Code	Transaction ID: PR327851920637
Washington FEC ID number of contributing federal political committee.	DC 20008-2614	Amount of Each Receipt this Period 40.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, Policy Developme	ent
Receipt For: Primary Genera Other (specify) ▼	Aggregate Year-to-Date ▼	P/R Deduction (\$20.00 Bi- Weekly)
SUPTOTAL of Descipts This Do	ge (optional)	158.00

	OULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 87 / 129 (check only one) X 11a
Any inform or for com	nation copied from such Reports and St mercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	OF COMMITTEE (In Full) can Hospital Association PAC			
	ıme (Last, First, Middle Initial) rk Seklecki			Date of Receipt
Mailing ————	Address 325 Seventh Street, NV Suite 700	N		M M / D D / Y Y Y Y
City <u>Wash</u>	ington	State DC	Zip Code 20004-2818	Transaction ID: PR327858020637 Amount of Each Receipt this Period
	number of contributing political committee.	C		78.00
tion-W Receip	Primary General		n sident, Political Affairs e Year-to-Date ▼	P/R Deduction (\$39.00 Bi-
Full Na Mr. Joh	Other (specify) Ime (Last, First, Middle Initial) In F. Barry Address One North Franklin	0 0		Date of Receipt
	One Worth Familian	State	Zip Code	
City Millis		MA	60606-3436	Transaction ID: PR327877820637 Amount of Each Receipt this Period
FEC ID	number of contributing political committee.	C		78.00
Name of Americation-Ch	of Employer an Hospital Associa- nicago	Occupation Regional	n Executive	
	t For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 429.00	P/R Deduction (\$39.00 Bi- Weekly)
	me (Last, First, Middle Initial) orge F. Bergstrom			Date of Receipt
Mailing	Address 130 North Garland Cou #3002	ırt		M M / D D / Y Y Y Y
City		State	Zip Code	Transaction ID: PR327895720637
	go Doubler of contributing political committee.	C	60602-4750	Amount of Each Receipt this Period 40.00
Name of Americation-Ch	of Employer an Hospital Associa- nicago	Occupation Vice Pre-		
	t For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 220.00	P/R Deduction (\$20.00 Bi- Weekly)
SURTOT	AL of Receipts This Page (optional)			196.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 88 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16
A or	ny information copied from such Reports and S for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. Richard J Umbdenstock		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700		M M / D D / Y Y Y Y
	City	State Zip Code	Transaction ID: PR328132820637
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation President	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	429.00	P/R Deduction (\$39.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Barbara Lorsbach		Date of Receipt
	Mailing Address 204 7th Ave		M M / D D / Y Y Y Y
	City	State Zip Code	Transaction ID: PR328136920637
	La Grange	IL 60525-6406	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Sr. Vice President, Member Relations	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify)	429.00	P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Donna J. Melkonian	<u> </u>	Date of Receipt
	Mailing Address 5545 North Wayne		M " M / D " D / Y " Y " Y " Y
	City	State Zip Code	Transaction ID: PR328223820637
	Chicago	IL 60640-1318	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 429.00	P/R Deduction (\$39.00 Bi- Weekly)
_	outer (apocity) 🔻		
Ι.	SUBTOTAL of Receipts This Page (optional)		234.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 89 / 129 (check only one) X
An or	y information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
<u>/</u>	Full Name (Last, First, Middle Initial) Dr. James D. Bentley, Ph.D.			Date of Receipt
	Mailing Address 13106 Vingle Lane			M M / D D / Y Y Y Y
	City Silver Spring	State MD	Zip Code 20906	Transaction ID: PR328224920637 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Sr. Vice	n President	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 429.00	P/R Deduction (\$39.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Ron O. Purcell			Date of Receipt
	Mailing Address 1093 N. Faldo Way			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR328241420637
	Eagle	<u>ID</u>	83616-5369	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional	n Executive	
	Receipt For:	,	e Year-to-Date ▼	
	Primary General Other (specify) ▼		220.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Richard J. Pollack			Date of Receipt
	Mailing Address 3475 North Venice Str	eet		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR328260920637
	Arlington	VA	22207-4446	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		78.00
	Name of Employer American Hospital Associa- tion-Washingt		e Vice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 429.00	P/R Deduction (\$39.00 Bi- Weekly)
	UBTOTAL of Receipts This Page (optional)	1		196.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	fc	se separate schedule(s) or each category of the etailed Summary Page	FOR LINE NUMBER: PAGE 90 / 129 (check only one) X
Any or f	r information copied from such Reports and Sor commercial purposes, other than using the	Statements may not e name and address	be sold or used by any perso of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
- I \	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Mr. Richard H. Wade			Date of Receipt
İ	Mailing Address 1221 Cavalier Road			M M / D D / Y Y Y Y
	City Arnold	State MD	Zip Code 21012-2126	Transaction ID: PR328310420637 Amount of Each Receipt this Period
Ī	FEC ID number of contributing federal political committee.	C		80.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For:	Occupation Sr. Vice Pres Aggregate Yea	ident, Communications r-to-Date ▼	
	Primary General Other (specify) ▼		440.00	P/R Deduction (\$40.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Steve M. Ahnen Mailing Address 1001 N. Potomac Stre	eet		Date of Receipt
	City		Zin Codo	
	Arlington	VA	Zip Code 22205-1629	Transaction ID: PR328312720637 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	22203 1023	78.00
İ	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Vice F	President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Yea	r-to-Date ▼ 429.00	P/R Deduction (\$39.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Lori M. Schor			Date of Receipt
ļ	Mailing Address 325 Seventh Street, N Suite 700	W		M M / D D / Y Y Y Y
	City		Zip Code	Transaction ID: PR328341820637
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		78.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For:	Occupation Director, Poli Aggregate Yea	tical Action & Grassroot	
	Primary General Other (specify) ▼	1.55.554.0 1.04	429.00	P/R Deduction (\$39.00 Bi- Weekly)
	JBTOTAL of Receipts This Page (optional)	I		236.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 91 / 129 (check only one) X 11a
Ai	ny information copied from such Reports and S for commercial purposes, other than using the	tatements may not be sold or used by any per name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
<u>/_</u>	Full Name (Last, First, Middle Initial) Ms. Carla L. Luggiero		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	V	M M / D D / Y Y Y Y
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR328490120637 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	19.24
	Name of Employer American Hospital Association-Washingt Receipt For: Primary General Other (specify) ▼	Occupation Sr. Associate Director Aggregate Year-to-Date ▼ 205.82	P/R Deduction (\$9.62 Bi-W-eekly)
	Full Name (Last, First, Middle Initial) Ms. Carolyn Forcina Mailing Address 200 Clover Hill Court		Date of Receipt
		Ctata Zia Cada	
	City Yardley	State Zip Code PA 19067-5736	Transaction ID: PR328511820637 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C 13007 3700	78.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 429.00	P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Alicia N. Mitchell		Date of Receipt
	Mailing Address 1501 N. Harrison Street	ıt .	M M / D D / Y Y Y Y
	City	State Zip Code	Transaction ID: PR328512020637
	Arlington FEC ID number of contributing federal political committee.	VA 22205-2726	Amount of Each Receipt this Period 40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President, Media Relations	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 220.00	P/R Deduction (\$20.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		137.24

or for comm NAME C America Full Nam Ms. Rebo Mailing A City Chicag FEC ID federal p Name of America tion-Chic Receipt City Chicag FEC ID federal p Rull Nam Dr. John Mailing A City Chicag FEC ID federal p Name of America tion-Chic Receipt Pr Ot Full Nam FEC ID federal p Name of America tion-Chic Receipt Pr Ot	nercial purposes, other than using the DF COMMITTEE (In Full) can Hospital Association PAC ne (Last, First, Middle Initial) ecca Chickey Address One North Franklin S number of contributing political committee. Employer in Hospital Association cago For: imary General her (specify) ne (Last, First, Middle Initial) R. Combes, MD Address 1 North Franklin SAtronal Committees.	State Zip Code IL 60606 C Occupation Director, Psychiatric and Substance Aggregate Year-to-Date 220.00	Date of Receipt Transaction ID: PR329013420637 Amount of Each Receipt this Period 40.00
Full Name of America tion-Chic Receipt Name of America tion-Chic Receipt City Chicag FEC ID federal p Pr Ot Ot Full Name of America tion-Chic Receipt Receipt Pr Ot Name of America tion-Chic Receipt Full Name of America tion-Chic Receipt Pr Ot Full Name of America tion-Chic Receipt Fruit Name of America tion-Chic Receipt Pr Ot	ean Hospital Association PAC ne (Last, First, Middle Initial) ecca Chickey Address One North Franklin Signature number of contributing solitical committee. Employer in Hospital Associacago For: imary General her (specify) ne (Last, First, Middle Initial) R. Combes, MD Address 1 North Franklin SAtronal	State Zip Code IL 60606 C Occupation Director, Psychiatric and Substance Aggregate Year-to-Date 220.00	Transaction ID: PR329013420637 Amount of Each Receipt this Period 40.00 P/R Deduction (\$20.00 Bi-Weekly) Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR329071320637
Ms. Rebo Mailing A City Chicag FEC ID federal p Name of America tion-Chic Receipt Pr Ot City Chicag Full Nam Mailing A City Chicag FEC ID federal p Name of America tion-Chic Receipt Pr Ot Full Nam Receipt Pr Ot	Address One North Franklin S One North Fran	State Zip Code IL 60606 C Occupation Director, Psychiatric and Substance Aggregate Year-to-Date 220.00	Transaction ID: PR329013420637 Amount of Each Receipt this Period 40.00 P/R Deduction (\$20.00 Bi-Weekly) Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR329071320637
City Chicag FEC ID federal p Name of America tion-Chie Receipt Full Nam Dr. John Mailing A City Chicag FEC ID federal p Name of America tion-Chie Receipt Pr Ot Tull Nam Name of Receipt Pr Ot Full Nam Receipt	Address One North Franklin S One North Franklin S	State Zip Code IL 60606 C Occupation Director, Psychiatric and Substance Aggregate Year-to-Date 220.00	Transaction ID: PR329013420637 Amount of Each Receipt this Period 40.00 P/R Deduction (\$20.00 Bi-Weekly) Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR329071320637
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FEC ID federal properties for the federal proper	number of contributing political committee. Employer in Hospital Associacago For: imary General her (specify) In e (Last, First, Middle Initial) R. Combes, MD Address 1 North Franklin SAtro	Occupation Director, Psychiatric and Substance Aggregate Year-to-Date 220.00 Teet State Zip Code	P/R Deduction (\$20.00 Bi-Weekly) Date of Receipt Transaction ID: PR329071320637
Full Name of America tion-Chic Receipt Full Name Dr. John Mailing A City Chicage FEC ID federal predefer	Employer In Hospital Associa- cago For: imary General her (specify) In e (Last, First, Middle Initial) R. Combes, MD Address 1 North Franklin SAtro	Occupation Director, Psychiatric and Substance Aggregate Year-to-Date 220.00 Teet State Zip Code	P/R Deduction (\$20.00 Bi-Weekly) Date of Receipt Transaction ID: PR329071320637
Full Name of Americal tion-Chic Receipt Full Name of Americal tion-Chic Receipt Full Name of Americal tion-Chic Receipt Full Name of Americal tion-Chic Receipt Full Name of Americal tion-Chic Receipt Full Name of Americal tion-Chic Receipt Full Name of Americal tion-Chic Receipt	cago For: imary General her (specify) ▼ ne (Last, First, Middle Initial) R. Combes, MD Address 1 North Franklin SAtro	Director, Psychiatric and Substance Aggregate Year-to-Date 220.00 Teet State Zip Code	P/R Deduction (\$20.00 Bi-Weekly) Date of Receipt Transaction ID: PR329071320637
Full Nam Dr. John Mailing A City Chicag FEC ID federal p Name of America tion-Chic Receipt Pr Ot Full Nam Ms. Roby	her (specify) ne (Last, First, Middle Initial) R. Combes, MD Address 1 North Franklin SAtro	reet State Zip Code	Date of Receipt Transaction ID: PR329071320637
Dr. John Mailing A City Chicag FEC ID federal p Name of America tion-Chic Receipt Pr Ot Full Nam Ms. Roby	R. Combes, MD Address 1 North Franklin SAtro	State Zip Code	Transaction ID: PR329071320637
City Chicag FEC ID federal p Name of America tion-Chie Receipt Pr Ot Full Nam Ms. Roby		State Zip Code	Transaction ID: PR329071320637
Chicag FEC ID federal p Name of America tion-Chic Receipt Pr Ot Full Nam Ms. Roby	0	'	
Receipt Pr Ot Full Nam Ms. Roby	0	IL 60614	Amount of Each Receipt this Period
Name of America tion-Chia Receipt Pr Ot			·
Full Nam	number of contributing political committee.	C	78.00
Receipt Pr Ot Pr Nam Ms. Roby	Employer n Hospital Associa-	Occupation President & COO, Leadership & Bus	sings
Full Nam Ms. Roby		Aggregate Year-to-Date ▼	311405
Ms. Roby	imary General her (specify) ▼	429.00	P/R Deduction (\$39.00 Bi- Weekly)
	ne (Last, First, Middle Initial) yn Cooke		Date of Receipt
	Address 325 Seventh Street, N Suite 700	NW	M " M / D " D / Y " Y " Y " Y
City		State Zip Code	Transaction ID: PR329084420637
<u>Washir</u>	ngton	DC 20004-2818	Amount of Each Receipt this Period
	number of contributing political committee.	C	40.00
Name of America tion-Wa	Employer ın Hospital Associa-	Occupation Senior Associate Director Executive	e Br
Receipt		Aggregate Year-to-Date ▼	
	imary General	220.00	P/R Deduction (\$20.00 Bi- Weekly)
SUBTOTA	her (specify) ▼		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate for each cate Detailed Sum	gory of the	FOR LINE NUMBER: PAGE 93 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16
A	ny information copied from such Reports and S for commercial purposes, other than using the	atements may not be sold or unname and address of any polit	sed by any person ical committee to so	for the purpose of soliciting contributions plicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
_	Full Name (Last, First, Middle Initial) Mr. W. Thomas Deweese			Date of Receipt
	Mailing Address 500 Interstate Bouleva	rd South		M M / D D / Y Y Y Y
	City Nashville	State Zip Code TN 37210-463	4	Transaction ID: PR329215720637
	FEC ID number of contributing federal political committee.	C 37210-403	-	Amount of Each Receipt this Period 78.00
	Name of Employer American Hospital Association-Chicago Receipt For: Primary General	Occupation Regional Executive Aggregate Year-to-Date	1 1 1 1	P/R Deduction (\$39.00 Bi-
_	Other (specify) ▼		429.00	Weekly)
	Full Name (Last, First, Middle Initial) Ms. Patricia Meersman Mailing Address One North Franklin			Date of Receipt
	City	State Zip Code		Transaction ID: PR330343320637
	Chicago	IL 60606-343	6	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Executive Services Dire	ector	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date	220.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Thomas Misfeldt			Date of Receipt
	Mailing Address One North Franklin			M M / D D / Y Y Y Y
	City	State Zip Code		Transaction ID: PR330411620637
	Chicago FEC ID number of contributing federal political committee.	IL 60606-343	6	Amount of Each Receipt this Period 40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Associate Regional Ex		
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date	220.00	P/R Deduction (\$20.00 Bi- Weekly)
Γ,	SUBTOTAL of Receipts This Page (optional)			158.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 94 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Ar or	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may not be sold or used by any per name and address of any political committee	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
<u>/</u>	Full Name (Last, First, Middle Initial) Mr. Paul N. Muraca		Date of Receipt
	Mailing Address 4960 138th Cricle We	st	M M / D D / Y Y Y
	City	State Zip Code	Transaction ID: PR330475420637
	Apple Valley	MN 55124	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa-	Occupation Regional Executive	
	tion-Chicago Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	429.00	P/R Deduction (\$39.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Jennifer E. Mallard	I	Date of Receipt
	Mailing Address 6109 North 9th Road		M " M
	City	State Zip Code	Transaction ID: PR330534320637
	Arlington	VA 22205-1609	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Sr. Associate Director	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	220.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Gene O'Dell	I.	Date of Receipt
	Mailing Address One North Franklin		M M / D D / Y Y Y
	City	State Zip Code	Transaction ID: PR330547720637
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer	Occupation	
	American Hospital Associa- tion-Chicago	Vice President, Strategic Planning	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	220.00	P/R Deduction (\$20.00 Bi- Weekly)
			158.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 95 / 129 (check only one) X
A or	ny information copied from such Reports and for commercial purposes, other than using the	Statements ma ne name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
<u>/_</u>	Full Name (Last, First, Middle Initial) Ms. Eileen O'Keefe			Date of Receipt
	Mailing Address 172 Atteridge			M M / D D / Y Y Y Y
	City Lake Forest	State IL	Zip Code 60045-1715	Transaction ID: PR330549220637 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	- '	sident, Member Relations	
	Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 220.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Walter J. Reiter			Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	٧W		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR330776120637
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation V.P., Adv	_n vocacy & Member Communi	cations
	Receipt For:	Aggregate	e Year-to-Date	
	Primary General Other (specify) ▼		220.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Darlene S. Vanderbush			Date of Receipt
	Mailing Address 26 West Glendale Av	e.		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR331304220637
	Alexandria	VA	22301-2402	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For:		n Advocacy and Public Policy e Year-to-Date ▼	Op
	Primary General Other (specify) ▼	Aggregate	220.00	P/R Deduction (\$20.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)			120.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 96 / 129 (check only one) X 11a 11b 11c 12 13 14 15 16
Ar	ny information copied from such Reports and for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
<u>/_</u>	Full Name (Last, First, Middle Initial) Mr. Alexander R. White, Sr.		Date of Receipt
	Mailing Address PO Box 15587		M M / D D / Y Y Y Y
	City	State Zip Code	Transaction ID: PR331416020637
	Austin	TX 78761-5587	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	116.00
	Name of Employer American Hospital Associa-	Occupation Regional Executive	
	tion Receipt For:	Aggregate Year-to-Date ▼	-
	Primary General Other (specify) ▼	638.00	P/R Deduction (\$58.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Donald May	1	Date of Receipt
	Mailing Address 521 Great Falls St.		M M / D D / Y Y Y Y
	City	State Zip Code	Transaction ID: PR331533220637
	Falls Church	VA 22046-2613	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President, Policy	
	Receipt For:	Aggregate Year-to-Date ▼	1
	Primary General Other (specify) ▼	429.00	P/R Deduction (\$39.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Kristin Welsh	1	Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	IW	M M / D D / Y Y Y Y
	City	State Zip Code	Transaction ID: PR517619720637
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President Executive Branch Rela	ti
	Receipt For: Primary General	Aggregate Year-to-Date ▼	D/D Dadwation (\$00.00 B)
	Other (specify)	429.00	P/R Deduction (\$39.00 Bi- Weekly)
	LIDTOTAL of Descints This Desc (entired)		272.00

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SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 97 / 129
ITEMIZED RECEIPTS	,	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using			
NAME OF COMMITTEE (In Full)			
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Ms. Ashley B. Thompson			Date of Receipt
Mailing Address 606 S. Royal St.			M M / D D / Y Y Y Y
City	State	Zip Code	Transaction ID: PR766023720637
Alexandria	VA	22314-4142	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		40.00
Name of Employer American Hospital Associa- tion-Washingt	Occupatio Senior A	n ssociate Director, Policy	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 220.00	P/R Deduction (\$20.00 Bi- Weekly)

SUBTOTAL of Receipts This Page (optional)	•	40.00
TOTAL This Period (last page this line number only)	•	97486.97

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SC	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 98 / 129
	· · · · · · · · · · · · · · · · · · ·		Use separate schedule(s)	(check only one)
ITI	EMIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b 11c X 12 13 14 15 16 17
Any or f	r information copied from such Reports and Statemor commercial purposes, other than using the name	ents may and add	r not be sold or used by any perso lress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Health Alliance of PA PAC - Federal			Date of Receipt
	Mailing Address Post Office Box 8600			05 22 2008
	City	State	Zip Code	Transaction ID: 15516215
	Harrisburg I	PA	17105-8600	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C Coo	0128082	10000.00
•	Name of Employer Oo	ccupatior	1	
	Receipt For: Primary General Other (specify)	ggregate	Year-to-Date ▼ 20000.00	

SUBTOTAL of Receipts This Page (optional)	>	10000.00
TOTAL This Period (last page this line number only)	•	10000.00

SCHEDULE A (FEC Form 3)	()		FOR LINE NUMBER: PAGE 99 / 129
ITEMIZED RECEIPTS	-,	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 X 17
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements ma the name and ad	y not be sold or used by any pers dress of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
American Hospital Association PAC	C		
Full Name (Last, First, Middle Initial) Citibank, F.S.B.			Date of Receipt
Mailing Address 1400 G Street, NW			05 30 2008
City	State	Zip Code	Transaction ID: 15587813
Washington	DC	20005	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		470.32
Name of Employer	Occupatio	n	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 2415.46	Interest

SUBTOTAL of Receipts This Page (optional)	>	470.32
TOTAL This Period (last page this line number only)	•	470.32

CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS				R LINE eck on	E NUMBE ly one)	R:			PAGE	100 /	/ 129
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ny Information copied from such Reports and State for commercial purposes, other than using the nan											s
NAME OF COMMITTEE (In Full)	To and address t	or arry portion our			511011 00111		10110 11	0111 00	011 00111		
American Hospital Association PAC											
Full Name (Last, First, Middle Initial) Moderate Democrats PAC								_		6	
Mailing Address 426 C. Street, NE										ž 0 č 8	3 ^Y
	Ctoto 7	in Codo			A		ر داد داد	Diale		-1 4la la F	Davis
City Washington					Amou	unt o	t Each	DISDI			
Purpose of Disbursement 2008 Contribution		Zip Code 20002 Zip Code 20002 Zip Code 20102 Zip Code 20102 Cate Ty Cate Ty General Cate Ty 011] L.	_	_		5	000.00	0	
Candidate Name Moderate Democrats PAC		C	Catego	ory/							
	ement For: Primary Other (specify		Туре	.	2008	Cor	ntribu	tion			
State: District:						e purpose of soliciting contribution contributions from such committee contributions from such contributions from such committee contributions from such committee contributions from such committee contributions from such committee contributions from such committee contributions from such contributions					
Full Name (Last, First, Middle Initial) Dirigo PAC							-			7	
Mailing Address P.O. Box 1355					0 ^M 5	M	[/] D	5	Y 2	žοŏε	3 ^Y
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	Mailing Address P.O. Box 960821				0 5 M	05	y Ž0	80
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۷.	Full Name (Last, First, Middle Initial) Kurt Schrader For Congress							n ID: burser		9527			
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	Mailing Address 777 S. Figueroa St. Suite 4050				0 5	M /	0 9	9 /	y ž	οŏε	Y		
	City Los Angeles	State Zip Code CA 90017				Amou	int of	Each [Disburs			-	
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Full Name (Last, First, Middle Initial) Sam Farr for Congress			Transaction ID: Date of Disburse									
Mailing Address 1010 S Street			05 0	9 7 2008								
City Sacramento	State Zip Code CA 95814		Amount of Each	Disbursement this Period								
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Candidate Name Rep. Sam Farr		Category/ Type										
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Full Name (Last, First, Middle Initial) Friends Of Tim Johnson			Transaction ID:									
Mailing Address PO Box 17097			05 0	7 2008								
City Urbana	State Zip Code IL 61803		Amount of Each	Disbursement this Period								
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Candidate Name Rep. Timothy V. Johnson		Category/ Type										
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	City Totowa	State Zip Code NJ 07511								Amount of Each Disbursement this Period								
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	State: NJ District: 08		· 															
	Full Name (Last, First, Middle Initial) Nita Lowey For Congress									on II sbur		_	8953	6				
	Mailing Address PO Box 271								05 7 2 0 0 8									
	City White Plains	State NY	Zip Code 10605				Amount of Each Disbursement this Period											
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Full Name (Last, First, Middle Initial) Dreier For Congress Committee			Transaction ID: 15489539 Date of Disbursement
Mailing Address P.O. Box 505			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Upland	State Zip Code CA 91785		Amount of Each Disbursement this Perio
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Full Name (Last, First, Middle Initial) Freedom & Democracy Fund			Transaction ID: 15545920 Date of Disbursement
Mailing Address 610 S. Boulevard			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Tampa	State Zip Code FL 33606		Amount of Each Disbursement this Perio
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	State: KY District: 04 Full Name (Last, First, Middle Initial) Texans For Lamar Smith			Transaction ID: 15587810 Date of Disbursement
	Mailing Address PO Box 6155			05
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	Full Name (Last, First, Middle Initial) Ben Chandler For Congress	1		Transaction ID: 15587815 Date of Disbursement
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	Candidate Name Rep. Joseph Crowley			Categ Typ	ory/								
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	Full Name (Last, First, Middle Initial) Cantor For Congress							Disburs	ser	nent	58782	4	
	Mailing Address P. O. Box 17813					0 ^M 5	М	/ D	3 (0 /	Y	ž 0 Ď 8	8 ^Y
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	Candidate Name Rep. Eric I. Cantor		7 2	Categ Typ									
	Office Sought: X House Senate President State: VA District: 07	rrsement For: 2008 X Primary Genera Other (specify) ▼	ıl			Cont	ribu	ition					
	Full Name (Last, First, Middle Initial) Heath Shuler For Congress					Date	of [Disburs	ser	ment			
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	City Asheville	State Zip Code NC 28814				Amo	unt	of Eacl	h [Disbu	ırseme	nt this	Period
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		First, Middle Initial) For Congress				Transaction ID: 15587829 Date of Disbursement
N	Mailing Address	P.O. Box 61480)			05 7 3 0 7 2 0 0 8
	City /irginia Beach		State VA	Zip Code 23466		Amount of Each Disbursement this Perio
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F	Rep. Thelma D		T 8:-1	0000	Category/ Type	
	Office Sought: State: VA	X House Senate President District: 02	Disbursement For: X Primary Other (sp	2008 General		Contribution
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	City Rocky Mount		State VA	Zip Code 24151		Amount of Each Disbursement this Perio
	Purpose of Disbu	rsement			011	1000.00
	Candidate Name Rep. Virgil H. (Goode, Jr.			Category/ Type	
C	Office Sought:	X House Senate President	Disbursement For: X Primary Other (sp	2008 General pecify)		Contribution
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F	State: VA Full Name (Last, Fiberi For Con	District: 05 First, Middle Initial)				Transaction ID: 15587834 Date of Disbursement
F	full Name (Last,	District: 05 First, Middle Initial) gress 2021 E Dublin 0	Granville Road			
F T	Full Name (Last, Fiberi For Con	District: 05 First, Middle Initial) gress	Granville Road State OH	Zip Code 43229		Date of Disbursement O 5 Amount of Each Disbursement this Period
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SCHEDULE B (FEC Form 3X)

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Burlingame			CA	94010			Amou	THE O	Lacii	DISDU		-	-
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Candidate Name Rep. Ellen O. Tau	uscher				ateg Type								
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Mailing Address	PO Box 2571						0 5		3	0		2008	
City Wilson			State NC	Zip Code 27894			Amou	nt o	f Each	Disbu	irseme	nt this F	Perio
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City Portland			State ME	Zip Code 04105			Amou	nt o	f Each	Disbu	irseme	nt this F	Perio
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Candidate Name Mr. Adam Cote					ateg	- 1							
	Y House Senate President	Disburser X	ment For: Primary Other (spe	2008 General			Contr	ibut	ion				
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ıT	CHEDULE B (FEC Form 3X)	Use separate schedule(21 1 -	LINE NUMBER: PAGE 123 / 129
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(Criec	
	y Information copied from such Reports and State for commercial purposes, other than using the nar			
$\left.\right\rangle$	NAME OF COMMITTEE (In Full) American Hospital Association PAC	is and data cost of any points	<u>a. 001.11.11.11.00</u>	
	Full Name (Last, First, Middle Initial) Lot of People for David Obey			Transaction ID: 15587838 Date of Disbursement
	Mailing Address PO Box 1322			05
	City Wausau	State Zip Code WI 54402		Amount of Each Disbursement this Perio
	Purpose of Disbursement Contribution		011	3000.00
	Candidate Name Rep. David Obey Office Sought: X House Disburs	sement For: 2008	Category Type	
	Senate President State: WI District: 07	Primary X General Other (specify) ▼		Contribution
	Full Name (Last, First, Middle Initial) Zack Space For Congress Committee			Transaction ID: 15588354 Date of Disbursement
	Mailing Address 123 West High Avenue			05
	City New Philadelphia	State Zip Code OH 44663		Amount of Each Disbursement this Perio
	Purpose of Disbursement In-Kind Contribution: Polling Services		011	4875.00
	Candidate Name Rep. Zachary Space		Category Type	
	Office Sought: X House Senate President State: OH District: 18	sement For: 2008 Primary X General Other (specify)		In-Kind Contribution: Polling Services
	Full Name (Last, First, Middle Initial) Nunes For Congress			Transaction ID: 15588416 Date of Disbursement
	Mailing Address PO Box 891			05 7 0 5 7 2 0 0 8
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	City Pixley	State Zip Code CA 93256		
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or t	for commercial purposes, other than using	g the name and addres	s of any political o	committee to so	olicit contributions from	m such comn	nittee			
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\rangle	American Hospital Association PA	AC .								
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	Rep. Bart Stupak			Туре						
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TOTAL This Period (last page this line number only)	<u> </u>	125375.00

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/	NAME OF COMMITTEE (In Full)			
/	American Hospital Association PAC			
	Full Name (Last, First, Middle Initial)			Transaction ID: 15489172
	Georgia Hospital Association			Date of Disbursement
				05 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 1675 Terrell Mill Road			05 19 2008
	City	State Zip Code		Amount of Each Disbursement this Period
	Marietta	GA 30067		
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	Candidate Name		Category/	
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	Office Sought: House Disburse	ement For:		Defund
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SUBTOTAL of Disbursements This Page (optional)	•	1560.33
TOTAL This Period (last page this line number only)		1560.33

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SCHEDULE B (FEC Form 3X)	I la a a a a martin a chia di Li Ci N	FOR LINE	NUMBER: PAGE 126 / 129
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American Hospital Association PAC			
Full Name (Last, First, Middle Initial)			Transaction ID: 15587530
American Express			Date of Disbursement
Mailing Address Ste. 001			05 0 0 1 7 2 0 0 8
City Chicago	State Zip Code IL 60679		Amount of Each Disbursement this Period
Purpose of Disbursement Merchant Fees		001	4.50
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		Merchant Fees
State: District:			
Full Name (Last, First, Middle Initial) Merchant Bankcard			Transaction ID: 15587801 Date of Disbursement
Mailing Address 1601 Elm Street			05 05 7 2008
City Dallas	State Zip Code TX 75201		Amount of Each Disbursement this Period
Purpose of Disbursement	7,0201		80.00
Merchant Fees Candidate Name		001 Category/ Type	
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)	,	Merchant Fees
Full Name (Last, First, Middle Initial)			Transaction ID: 15587805
Merchant Bankcard			Date of Disbursement
Mailing Address 1601 Elm Street			05 06 7 2008
City Dallas	State Zip Code TX 75201		Amount of Each Disbursement this Period
Purpose of Disbursement Merchant Fees		001	68.36
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary Other (specify)	.,,,,,	Merchant Fees
State: District:			
SUBTOTAL of Disbursements This Page (optional)		>	152.86

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SCHEDULE B (FEC Form 3X)		arate schedule(s)			OR LIN			R:	PAGE 127 / 129										
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Chicago	State IL	Zip Code 60679					Alliou	iii o	Lacii	Dis	Sourse	IIIEII	35.5						
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Cooper & Secrest Associates, Inc.							Date o	of D	sburse	eme	ent			V					
Mailing Address 228 South Washington S Suite 330	treet						0 5	М	້ 3	3 1] / L	ž	0 0 8	3					
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$\overline{\ }$	NAME OF COMMIT	TTEE (In Full)																
\rangle	American Hospit	al Association P	AC															
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	Cooper & Secres	st Associates, Inc) <u>.</u>							Date		-			٠.			
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		President		Other (spe	ecify) 🔻							-						
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SUBTOTAL of Disbursements This Page (optional)	•	-4875.00
TOTAL This Period (last page this line number only)	<u> </u>	8359.91

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURE	:S		PAGE 129 / 129 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full) American Hospital Association PAC		FEC	IDENTIFICATION NUMBER ▼ C00106146
Check if 24-hour notice 48-hour notice Full Name (Last, First, Middle, Initial) of Payee MSA Media Buying Mailing Address 300 North Lee Street		Date M M / D	9 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Suite 500 City State Alexandria VA Purpose of Expenditure	Zip Code 22314 Category/ Type 004	Transaction ID: Office Sought: X	Senate District: 03 Presidential
Name of Federal Candidate supported or Opposed by expendition Rep. Leonard L. Boswell	ure:	Check One: X Disbursement For:	
Calendar Year-To-Date Per Election for Office Sought	44000.00	Other (sp 2008	ecify) :

(a) SUBTOTAL of Itemized Independent Expenditures	44000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	44000.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Ms. Melinda Hatton Signature	Date 0 6 1 9 2 0 0 8